

Angela Bell Acupuncture
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WOMEN'S HEALTH INTAKE FORM

Patient Name:	Date:
Address:	
City: State:	Zip:
Phone:	
Email:	Date of Birth:
May I add you to my email list?	
Emergency Contact:	Contact Phone:
How did you hear about me?	
Date of birth:	
Current weight:	
Date of Last Period:	

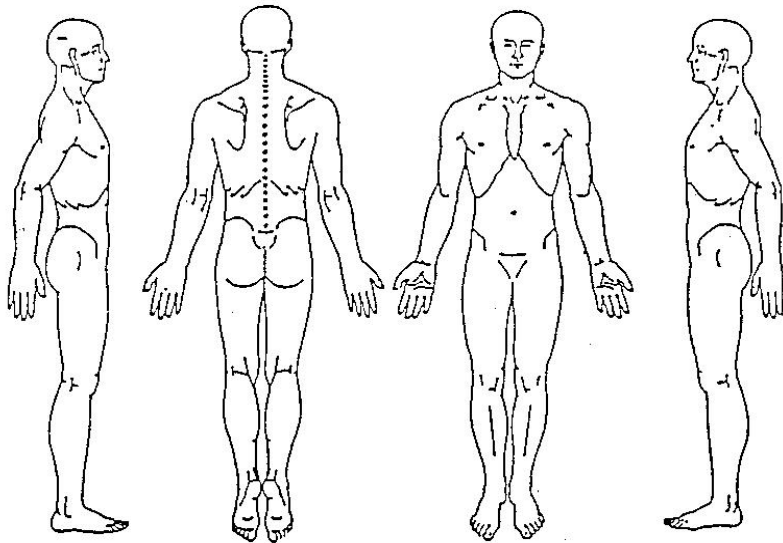
*Please bring with you any/all recent (within one year) blood tests and/or Basal Body Temperature (BBT) Charts.

CURRENT HEALTH

What are the main symptoms/problems you seek treatment for, and how long have you had them?

Medications / Vitamins / Supplements
Please list all over-the-counter medications, vitamins and/or supplements you currently take including any herbal medicines.

Please indicate any painful or distressed areas by circling the area.



Days in Cycle	Cycle Day you ovulate

In the long narrow table on the right of this page, please list how long your menstrual cycles are from month to month (i.e. do you have 28 day cycles, 34 day cycles, etc.) Next to the number of days in your cycle list at which cycle day you typically ovulate (i.e. CD 14, CD16, etc)

Gynecological History	
Have you been tracking ovulation and/or cervical mucus? If so, for how long?	
Number of pregnancies and/or number of live births?	
Please list any gynecological diagnosis you have received i.e. endometriosis, pelvic infections, ovarian cysts, PCOS, an- ovulation, etc.	
Please list any surgeries or over-night hospital stays:	
Cups of coffee or other caffeinated beverages/day?	
Alcoholic beverages/day?	
Have you been using temperature charts to track ovulation?	
If yes, for how many months?	
Have you been using ovulation predictor kits?	
How old were you when you had you first period?	
How frequently do your periods come?	
How long do your periods last?	
Do you experience cramping with your periods?	
If yes, when during your cycles do you have pain?	Before / During / After
How would you describe the cramps?	Mild / Moderate / Severe

Gynecological History Continued	
Do you take pain medication for the cramps? If yes, how much?	
Do you bleed or spot between periods?	
Have you ever had an abnormal Pap smear result?	
If yes, what therapy was required? Cryotherapy(freezing of cervix), Laser therapy, Cone biopsy LEEP Other: _____	
Have you ever had any of the following infections involving any part of the reproductive tract (vagina, cervix, uterus, ovaries)? Chlamydia Trichomonas Gonorrhea Herpes Genital warts	
If yes, when and what treatment did you receive?	
Do you have pain with intercourse?	
If yes, does the pain remain in your lower abdomen after intercourse if over?	

Kidney Deficiency/Yin	Yes	No
Do you have low back weakness, soreness, pain or knee problems?		
Do you have ringing in the ears or dizziness?		
Is your hair prematurely gray?		
Do you have vaginal dryness?		
Is your mid-cycle cervical mucus scanty or non-existent?		
Do you have dark circles around your eyes?		
Do you urinate frequently?		
Do you have night sweats?		
Are you prone to hot flashes?		
Are you fearful often?		
Are you in menopause?		

Kidney Deficiency/Yang	Yes	No
Do you have lower back pain, especially before your period?		
Is your lower back sore or weak?		
Are your feet cold, especially at night?		
Are you typically colder by nature than those around you?		
Do you have a low libido?		
Are you fearful often?		
Do you wake up at night or in the early morning because you have to urinate? How many times?		
Do you urinate frequently and is the urine dilute and/or profuse?		
Do you have early morning loose or urgent stools?		
Do you have profuse vaginal discharge?		
Does your menstrual blood tend to be dull in color?		

Blood Deficiency	Yes	No
Do your periods tend to be light, scanty or late?		
Do you have dry, flaky skin?		
Are you prone to getting chapped lips?		
Are your fingernails or toenails brittle?		
Do you have problems with thinning hair?		
Is your hair brittle or dry?		
Do you have poor night vision?		
Do you get dizzy or lightheaded around your period?		
Are your lips, inside your lower eyelids or tongue, pale in color?		

Dampness	Yes	No
Do you feel tired and sluggish after a meal?		
Do you have fibrocystic breasts?		
Do you have cystic or pustular acne?		
Do you have urgent or foul smelling stools?		
Does your menstrual blood contain stringy tissue or mucus?		
Are you prone to yeast infections and vaginal itching?		
Do your joints ache?		
Are you overweight?		

Blood Stasis	Yes	No
Is your menstrual flow ever brown or black in color?		
Do you feel mid-cycle pain around your ovaries?		
Do you have painful, unmovable breast lumps?		
Do you experience periodic numbness of your hands and feet?		
Do you have varicose or spider veins?		
Do you have any red spots on your skin?		
Does your complexion appear dark or sooty?		
Do you have chronic hemorrhoids?		
Does your menstrual blood contain clots?		
Have you been diagnosed with endometriosis or uterine fibroids?		

Blood Stasis Continued	Yes	No
Is your lower abdomen tender to palpate?		
Can you feel any abnormal lumps in your lower abdomen?		
Do you have piercing or stabbing menstrual cramps?		
Do you see dark spots in your eyes?		
Have you been diagnosed with any vascular abnormality or blood clotting disorder?		

Spleen Deficiency	Yes	No
Are you often fatigued?		
Do you have a poor appetite?		
Is your energy lower after a meal?		
Do you feel bloated after a eating?		
Do you crave sweets?		
Do you have loose stools, abdominal pain or digestive problems?		
Are you hands and feet usually cold?		
Are you prone to feeling heavy or sluggish?		
Do you often feel foggy headed or a heaviness in the head?		
Do you bruise easily?		
Do you have poor circulation?		
Do you have varicose veins?		
Do your arms and legs lack strength or feel heavy?		
Are you prone to worry?		
Have you been diagnosed with low blood pressure?		
Do you sweat easily without exertion?		
Do you feel lightheaded or have visual changes when you stand quickly?		
Is your menstruation thin, watery or pinkish in color?		
Are you more tired around ovulation or menstruation?		

Spleen Deficiency Continued	Yes	No
Do you ever spot a few days prior to menstruation?		
Have you ever been diagnosed with uterine prolapsed?		
Do you have a bearing down sensation with menstrual cramps?		
Are you often sick or do you have allergies?		
Have you been diagnosed with hypothyroidism or anemia?		
Have you had hemorrhoids or polyps?		
Do you have a pale, yellowish complexion?		

Liver Qi Stagnation	Yes	No
Are you prone to emotional depression?		
Are you prone to anger or rage?		
Do you become irritable premenstrually?		
Do you feel irritable around ovulation?		
Does it feel like your ovulation lasts longer than it should?		
Are your breasts sensitive or sore at ovulation?		
Do you experience nipple pain or discharge from your nipples?		
Do you have a lot of premenstrual breast distention or pain?		
Have you been diagnosed with elevated prolactin levels?		
Do you become bloated premenstrually?		
Are your pupils usually dilated?		

Liver Qi Stagnation Continued	Yes	No
Do you have difficulty falling asleep at night?		
Do you experience heartburn or wake with a bitter taste in your mouth?		
Are your menses painful?		
Do you feel your menstrual cramps in the external genitalia?		
Is the menstrual blood thick and dark or purplish in color?		

Damp Heat	Yes	No
Do you have foul smelling, yellow or greenish vaginal discharge?		
Are you prone to vaginal and or rectal itching during the luteal or premenstrual phase?		

Excess Heat	Yes	No
Does your pulse rate feel rapid?		
Are your mouth and throat usually dry?		
Are you thirsty most of the time?		
Do you crave icy, cold drinks?		
Do you often feel warmer than those around you?		
Do you wake up sweating?		
Do you break out with red acne (especially premenstrually?)		
Do you have a short menstrual cycle?		
Do you have vaginal irritation or rashes?		

Heart Deficiency	Yes	No
Do you wake up early in the morning and can't fall back asleep?		
Do you get heart palpitations especially when anxious?		
Do you have nightmares?		
Do you seem low in spirit or lacking in vitality?		
Are you prone to agitation or extreme restlessness?		
Do you fidget a lot?		
Is the tip of your tongue red?		

HORMONE EVALUATION

High Cortisol	
	A feeling you're constantly racing from one task to the next?
	Feeling wired yet tired?
	A struggle calming down before bedtime, or a second wind that keeps you up late?
	Difficulty falling asleep or disrupted sleep?
	A feeling of anxiety or nervousness – can't stop worrying about things beyond your control?
	A quickness to feel anger or rage – frequent screaming or yelling?
	Memory lapses or feeling distracted, especially under duress?
	Sugar cravings (you need "a little something" after each meal, usually of the chocolate variety)?
	Increased abdominal circumference, greater than 35 inches (the dreaded abdominal muffin top – not bloating)?
	Skin conditions such as eczema or thin skin (sometimes physiological and psychologically)?
	Bone Loss (perhaps your doctor uses scarier terms such as osteopenia or osteoporosis)?
	High blood pressure or rapid heartbeat unrelated to those cute red shoes in the store window?
	High blood sugar (maybe your clinician has mentioned the words prediabetes or even diabetes or insulin resistance)? Shakiness between meals, also known as blood sugar instability?
	Indigestion, ulcers or GERD?
	More difficulty recovering from physical injury than in the past?
	Unexplained pink to purple stretch marks on your belly or back?
	Irregular menstrual cycles?
	Difficulty getting pregnant?

Low Cortisol	
	Fatigue or burnout (you use caffeine to bolster your energy or fall asleep while reading or watching a movie?)
	Loss of stamina, particularly in the afternoon, from two to five?
	An atypical addiction to a negative point of view?
	Crying jags for no particular reason?
	Decreased problem-solving ability?
	Feeling stressed most of the time (everything seems harder than before and you have trouble coping)? Decreased stress tolerance?
	Insomnia or difficulty staying asleep, especially between one and four in the morning?
	Low blood pressure?
	Postural hypotension (you stand up from laying down and feel dizzy)?
	Difficulty fighting infection (you catch every virus you meet, particularly respiratory)? Difficulty recovering from illness or surgery or healing wounds?
	Asthma? Bronchitis? Chronic cough? Allergies?
	Low or unstable blood sugar?
	Salt cravings?
	Excess sweating?
	Nausea, vomiting or diarrhea? Or loose stool alternating with constipation?
	Muscle weakness, especially around the knee? Muscle or joint pain?
	Hemorrhoids or varicose veins?
	Your blood seems to pool easily or your skin bruises easily?
	A thyroid problem that's been treated, you feel better and suddenly you feel palpitations or have rapid or irregular heartbeats (a sign of low cortisol/low thyroid combo)?

Low Progesterone And Progesterone Resistance	
	Agitation or PMS?
	Cyclical headaches (particularly menstrual or hormonal migraines)?
	Painful and/or swollen breasts?
	Irregular menstrual cycles or cycles becoming more frequent as you age?
	Heavy or painful periods (heavy: going through a super-pad or tampon every two hours or less; painful: you can't function without ibuprofen)?
	Bloating, particularly in the ankles and belly and/or fluid retention (in other words, you gain 3 to 5 pounds or more before your period)?
	Ovarian cysts, breast cysts or endometrial cysts (polyps)?
	Easily disrupted sleep?
	Itchy or restless legs, especially at night?
	Increased clumsiness or poor coordination?
	Infertility or subfertility (you've been trying hard to conceive but haven't hit the official twelve-month mark of no conception – six months if you're thirty-five or older)?
	Miscarriage in the first trimester

Excess Estrogen	
	Bloating, puffiness or water retention?
	Abnormal Pap smears?
	Heavy bleeding or postmenopausal bleeding?
	Rapid weight gain, particularly in the hips and butt?
	Increased bra-cup size or breast tenderness?
	Fibroids?
	Endometriosis or painful periods?
	Mood swings, PMS, depression or just irritability?
	Weepiness, sometimes over the most ridiculous things?
	Mini breakdowns? Anxiety?
	Migraines or other headaches?
	Insomnia?
	Brain fog?
	A red flush on your face (or a diagnoses or rosacea)?
	Gallbladder problems (or removal)?

Low Estrogen	
	Poor memory (you walk into a room to do something, then wonder what it was or draw a blank mid-sentence)?
	Emotional fragility, especially compared with how you felt ten years ago?
	Depression, perhaps with anxiety or lethargy (or, more commonly dysthymia: low-grade depression that lasts more than two weeks)?
	Wrinkles?
	Night sweats or hot flashes?
	Trouble sleeping, waking up in the middle of the night?
	A leaky or overactive bladder?

Low Estrogen Continued	
	Bladder infections?
	Droopy breasts or breasts lessening in volume?
	Sun damage more obvious, even glaring on your chest, face and shoulders?
	Achy joints?
	Recent injuries, particularly to wrists, shoulders, lower back or knees?
	Loss of interest in exercise?
	Bone loss?
	Vaginal dryness, irritation or loss of feeling?
	Dryness elsewhere (dry eyes, dry skin, dry hair)?
	Low libido (it's been dwindling for a while and now you realize it's half or less than what it used to be)?
	Painful sex?

Excess Androgens	
	Excess hair on your face, chest or arms?
	Acne?
	Greasy skin and/or hair?
	Thinning head hair?
	Discoloration of your armpits (darker and thicker than your normal skin)?
	Skin tags, especially on your neck and upper torso?
	Hyperglycemia (high blood sugar) or hypoglycemia (low blood sugar)?
	Reactivity and/or irritability or excessively aggressive or authoritarian episodes?
	Ovarian cysts?
	Mid-cycle pain?
	Difficulty getting pregnant?
	Polycystic ovarian syndrome?

Low Thyroid	
	Hair loss, including the outer third of your eyebrows and/or eyelashes?
	Dry skin?
	Dry, straw-like hair that tangles easily?
	Thin, brittle fingernails?
	Fluid retention or swollen ankles?
	An additional few pounds, or 20, that you just can't lose?
	High cholesterol?
	Bowel movements less often than once a day or you feel you don't have complete bowel movements?
	Recurrent headaches?
	Decreased sweating?
	Muscle or joint aches or poor muscle tone?

Low Thyroid Continued	
	Tingling in your hands or feet?
	Cold hands and feet? Cold intolerance? Heat intolerance?
	A sensitivity to cold (you shiver more easily than others and are always wearing layers)?
	Slow speech, perhaps with a hoarse or halting voice?
	A slow heart rate or bradycardia (fewer than 60 beats per minute)?
	Lethargy (you feel like you are moving through molasses)?
	Fatigue, particularly in the morning?
	Slow brain, slow thoughts? Difficulty concentrating?
	Sluggish reflexes, diminished reaction time, even a bit of apathy?
	Depression or moodiness?
	Taking an antidepressant but still not feeling like yourself?
	Heavy periods or other menstrual problems?
	Infertility or miscarriage? Preterm birth?
	An enlarged thyroid/goiter? Difficulty swallowing? Enlarged tongue?
	A family history or thyroid problems?

Please describe any other details you feel are relevant to your health.
