

Ruchi Agarwal, MD

Well Care Ob & Gyn PC

303 2nd avenue, Suite 9, New York NY 10003
Phone 212 777 4300 Fax 917 534 0400

1749 Grand Concourse, suite A, Bronx NY 10453
Phone 718 534 0400 Fax 917 534 0400

GYNECOLOGIC ANNUAL VISIT

Name _____ Age _____ Today's date _____

The reason for your visit today:

Dates of last:

Blood Test _____ Pap _____ Mammogram _____ BMD _____
Colonoscopy _____ flu Vaccine _____

Interval Gynecologic History

Date last Pap smear? _____ Date last mammogram? _____ Type of contraception _____
Date of last menstrual period _____ Menstrual period occurs every_ days and lasts _____ days
Do you have sex? Yes No Have you had difficulty with sex since your last visit? Yes No
Have you had any new sexual partners since your last visit? Yes No
Menopausal symptoms (circle) Vaginal Dryness Hot Flashes Mood Swings insomnia Night Sweats

Interval medical/surgical history

Any illness or surgeries since your last visit here? Yes No (describe) _____

Please list your current medications (include vitamins, herbs and other supplements)

Name of medication Dosage How often? Name of medication Dosage How often?

Name of medication	Dosage	How often?	Name of medication	Dosage	How often?

Review of Systems: Are you experiencing any of the following symptoms? (Circle all that apply. Check if none.)

Constitutional	None	Weight Loss	Weight Gain	Fever	Fatigue
Eye Problems	None	Vision change	Glass /Contacts		
Ear, Nose, Throat	None	Ulcers,	Sinusitis,	Headache,	Hearing problems
Cardiovascular	None	Chest Pain	Leg Swelling	Palpitations	
Respiratory	None	Wheezing	Cough	Shortness	
Gastrointestinal	None	Diarrhea	of breath	Constipation	Nausea / Abdominal pain
Skin /Breast	None	Breast pain	Nipple Discharge	Breast Mass	
Neurological	None	Fainting	Seizures	Numbness	
Psychiatric	None	Depression	Anxiety		
Blood /Lymph	None	Easy bruising	Abnormal bleeding	Swollen Glands	
Skin /Muscles	None	Skin Rash	Muscle Pain	Muscle weakness	

Any new illness in your family? Yes No

Any big changes? Job, marriage, divorce etc.) Yes No

Clinician Comments:

