

PERSONAL HEALTH RECORD

Symptom Diary

Important Symptoms to Describe to Your Doctor, With Your Next Medical Visit

- Head**
- Severe Headache
 - Headache Worse at Night
 - Dizziness or Loss of Balance
 - Pins and Needles over Head or Face
 - Loss of, or Blurred Vision
 - Ringing in Ears or Loss of Hearing

- Chest**
- Chest Pain
 - Chest Pain, Worse With Exercise
 - Shortness of Breath
 - Irregular Heart Beat
 - Cough for at Least a Month
 - Bloody Phlegm

- Digestive**
- Difficulty Swallowing
 - Persistent Heartburn, or Nausea
 - Abdominal Pain
 - Bloody or Black Stools

- Genito Urinary**
- Excessive Urination
 - Pain With, or Blood in Urine
 - Urine Incontinence
 - Painful Intercourse
 - Loss of Sexual Desire
 - Breast Pain &/or Lump
 - Heavy &/or Painful Menstruations

- Skin**
- New mole
 - Changing Skin Blemish
 - Sore That Won't Heal
 - Itchiness
 - Rash

- Muscles, Bones, Joints**
- Swollen Joints
 - Painful Joints
 - Stiffness
 - Stiff Neck
 - Leg Pain
 - Arm Pain

- Neurological**
- Tingling or Burning
 - Loss of Strength
 - Shakiness
 - Memory Loss
 - Feeling Depressed
 - Extreme Nervousness
 - Suicidal Thoughts

- General**
- Fever
 - Weight Loss
 - Night Sweats
 - Fatigue
 - Weight Gain
 - Excessive Thirst
 - Daytime Sleepiness
 - Insomnia
 - Lack of Concentration