

KOLLING PHARMACY MALE CONSULTATION FORM

Today's Date:		Birth Date:		Physician:		
PATIENT INFORMATION						
Patient's last name:		First:	Middle:	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs.	<input type="checkbox"/> Miss <input type="checkbox"/> Ms.	EMAIL ADDRESS:
Street address:			Social Security no.:	Home phone : ()		
P.O. box:	City:			State:	ZIP Code:	
Caffeine Intake	Tobacco Intake	Caffeine Intake		Do You Exercise? What? Type?		
DIET: Describe your typical daily food intake:						
Breakfast	Lunch	Dinner		Snacks/Other		

MEDICATIONS	
(Please write the name, dose, and frequency of each medicine.)	

Please list any herbal, vitamins, minerals, nutrients that you are taking

Please List All Allergies that you have	

MEDICAL CONDITIONS/DISEASES.

Please check all that apply.

YES		YES	
Heart Disease		Blood clotting problems	
High cholesterol or lipids		Lung condition (ex: asthma, emphysema, COPD)	
High Blood Pressure		Diabetes	
Cancer		Arthritis or joint problems	
Ulcers		Depression	
Thyroid disease		Epilepsy	
Eye disease		Other:	

PHYSICAL FINDINGS

Please put a check mark on the symptoms that you are or have experienced.

YES		YES	
Loss of hair in the face, axilla, or groin		Diabetic	
Thinning of skin		Decreased libido	
Capillary dilatation		Lack of energy	
Decrease in testicular size		Decrease in strength	
Increased waist to hip ratio (apple shape)		Decrease in endurance	
Loss of height		Grumpiness toward others	
Feelings of sadness		Are your erections less strong?	
Have you noticed a recent deterioration in your ability to play sports?		Do you have a decreased 'enjoyment of life?'	
Are you falling asleep after dinner?		Has there been a recent deterioration in your work performance?	
Do you have difficulty concentrating?		Are you forgetful?	
Do you lack sexual interest?		Do you have increased anxiety?	

PLEASE TELL US WHY YOU ARE CONTACTING GARY KOLLING.

PLEASE DOUBLE CHECK PAGE 1. WE NEED YOUR TELEPHONE NUMBER AND, IF YOU HAVE ONE, YOUR EMAIL.

Thank you for contacting Kolling Pharmacy. After Gary Kolling receives your information, he will contact you.