

**THE TRUONG NEUROSCIENCE INSTITUTE**

*D.B.A THE PARKINSONS & MOVEMENT DISORDER MEDICAL GROUP*

Daniel Truong, M.D.    Mayank Pathak, M.D.    Nguyen Thong, M.D.    Christina MyChi Nguyen, M.D.

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**Specializing In:**    Parkinsonism    Myoclonus    Chorea    Tourette Syndrome    Spasmodic Torticollis  
Blepharospasm    Tardive Dyskinesia    Tremors    Dystonia    Restless Leg Syndrome    Spasmodic Dysphonia

*NEW PATIENT QUESTIONNAIRE*

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*Name* \_\_\_\_\_

*Reason for visit* \_\_\_\_\_

***What Medications are you currently taking?***

<i>Name of Drug</i>	<i>Dose in Milligrams</i>	<i>How many times per day?</i>

***List any allergies you have and what happens***

<i>Name of Drug</i>	<i>Describe what happens</i>

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***What Medical Diagnoses do you have?***

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***Have you had any surgeries?***

*Surgery*

*Year of Surgery*

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***How often do you?***

*Smoke cigarettes*    *never*    *occasionally*    *frequently*

*Drink alcohol*    *never*    *occasionally*    *frequently*

*Have you ever tried illicit drugs?*    *yes*    *no*    *using*

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**Family History**

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Father: \_\_\_\_\_ Living \_\_\_\_\_ Deceased

Known diseases: \_\_\_\_\_

Mother: \_\_\_\_\_ Living \_\_\_\_\_ Deceased

Known diseases: \_\_\_\_\_

**General Symptoms:** Please mark any of the symptoms that you are currently experiencing.

**CONSTITUTIONAL**

- Fever
- Chills
- Malaise/Fatigue
- Sweating
- Weakness

**CARDIOVASCULAR**

- Leg swelling
  - Pain in Legs after walking
- RESPIRATORY**
- Cough
  - Shortness of Breath

**MUSCULOSKELETAL**

- Neck Pain
  - Muscle Pain
- ENDO/HEMATOLOGY**
- Easy Bleeding/ Bruising

**SKIN**

- Rash
- Itching

**GASTROINTESTINAL**

- Nausea
- Diarrhea
- Constipation

**NEUROLOGICAL**

- Dizziness
- Tingling
- Tremor
- Sensory Change
- Seizures
- Loss of Consciousness

**HENT**

- Headaches
- Hearing Loss
- Ringing in Ears

**GENITOURINARY**

- Urinary urgency
- Urinary incontinence

**PSYCHIATRIC**

- Depression
- Anxiety
- Insomnia

**EYES**

- Blurry Vision
- Double Vision

**Other**

- \_\_\_\_\_
- \_\_\_\_\_