Pelvic Symptoms/Medical History

Name: Date:
What brought you here for treatment?
When did your symptoms start?
Please describe how your symptoms are limiting your personal and/or professional life:
Have you had prior pelvic PT treatment?
What are your goals for treatment?
<u>Current Symptoms</u> (Check or circle all that apply)
Pelvic PainNo painPain in the :lower abdomengroinperineumvagina/vestibulepenis/testiclesprostatePain with:sittingintercourseGYN examstampon usetight clothingmanual stimulationmenstruationovulationerectionejaculationfeeling cold
Describe the pain:
What make the pain worse
What alleviates the pain?
Are you taking any medication for pain?Are you sexually active?Y esNo
Bladder Normal bladder function Increased frequency of urination Decreased frequency of urination or retention Urgency with:key in doorrunning watercoldentering a bathroomcoffee/caffeine Leaking urine with:cough/sneeze /laughrun /jump/exercisesexcoldanxiety Leaking small volume drops Leaking large volume/full bladder
Pad use Type:panty shieldmini padmaxi padfull garmentPain with urination
Difficulty starting a stream of urineIncomplete emptying or "double voiding"Post void dribbling
No sensation of urge to voidurge to void at night

Bowel
Normal bowel function (1-2 times per day)
Increased frequency of BM:times per day/week
Decreased frequency of BM or constipation
Urgency with:key in doorrunning watercoldentering a bathroomcoffee/caffeine
Leaking feces or gas with:cough/sneeze /laughrun /jump/exercisesexcoldanxiety
Leaking small amounts of feces (soiling undergarments)
Leaking large volumes of feces
Pad use Type:panty shieldmini padmaxi padfull garment
Pain with BM
Pushing or straining to have a BM
Incomplete emptying of bowel
No sensation of urge to have a BM
Women:
Menopause
Age periods stopped
Perimenopausal symptoms (describe):
Menstruating
Age of first period
Regular menstrual cycles
Irregular menstrual cycles Explain:
Pain or other symptoms with menses/ovulation? Explain:
Premenstrual symptoms (describe):
Use of birth control? Type:
Pregnant (weeks) Due Date:
Pregnancies: Vaginal births: Cesareans: Episiotomies: Perineal tears: Level:
Problems/injuries related to pregnancy:
Gestational diabetes
Preeclampsia
Retroverted uterus
Fibroids/tumors
Endometriosis
Ovarian cysts/PCOS
Pelvic inflammatory disease
Medications, herbs or supplements for hormone replacement:
Mann
Men:
Enlarged prostate
Prostatitis
PSA testsnormalabnormal
Premature ejaculation
Delayed ejaculation or inability to ejaculate
Pain with ejaculation
Erectile dysfunction
Peyronie's Disease

Medical History:
Pelvic trauma Explain:
Coccyx sprain or fracture
Sacral fracture
Sexual or physical abuse
Sexually transmitted disease
HIV or AIDS
Hepatitis
Hemorrhoids
Fibromyalgia
Cancer Type:
Neurological problem:
Other medical problem:
Surgical History:
Brain
Neck
Back
Hip
Abdominal: stomach liver pancreas spleen gall bladder small intestine
Bladder
Colorectal
Hysterectomy
Mastectomy
Oopherectomy
Prostatectomy
TURP
Vastectomy
Other: