eWellness Questionnaire

Helping you one question at a time!

ENDOMETRIOSIS

Name:		Date of Birth:
		Patient Code:
Select Rarely 'R' if this is an uncommon event or symptom.		At first glance there may seem to be a lot of questions. But each of these questions were selected because of their direct or indirect relation to the symptoms mentioned.
Section 1 1. R F A	Yeast / Fungal problems	2. R F A Nervousness or irritable
4. R F A 5. R F A	Difficulty going to sleeping Difficulty staying asleep Can't loose weight Slow metabolism	 7. R F A Too much stress / tension 8. R F A Fatigued or tired 9. R F A Unexplained swellings
11. R F A 12. R F A 13. R F A 14. R F A 15. R F A 16. R F A 17. R F A 18. R F A	Pre-menopausal Peri-menopausal Suffer from PMS Breast tenderness Vaginal discharge Vaginal dryness Birth control Irregular periods Excessive period bleeding Ovarian cysts	20. R F A Fibrocystic breasts 21. R F A Fertility concerns 22. R F A Increase in urination 23. R F A Pelvic pain or cramping 24. R F A Mood swings 25. R F A Hot flashes / sweats 26. R F A Sexually transmitted diseases 27. R F A Decrease in sex drive 28. R F A Pain with sex 29. R F A Hormone replacement
	Indigestion or bloating Abdominal cramps or pain	32. R F A Constipation
Section 5 33. R F A 34. R F A	Blood in your urine Over-active bladder	35. R F A Urinary urgency
Section 6 36. R F A	Fibromyalgia	37. R F A Back pain or neck pain
Section 7 38. R F A	Brain fog - lack of concentration	
Section 8 39. R F A	Anxiety / anxiousness	40. R F A Problems relaxing
Section 9 41. R F A	Allergies	
Section 10 42. R F A	Sick more often	43. R F A Swollen glands