

Please circle as appropriate



Vascular Worksheet

Dr Maged Aziz
MBChB, FRACS
Vascular and Endovascular Surgeon

Name:

Past History:

- | | | | | | |
|--------------------------------|--------|-----------------|-----------|-------|--------------|
| 1) Heart | Angina | Irregularity | Failure | Valve | Heart attack |
| 2) High blood pressure | | | | | |
| 3) High Cholesterol | | | | | |
| 4) Diabetes | | | | | |
| 5) Respiratory | Asthma | Chest infection | Emphysema | | |
| 6) Kidney | | | | | |
| 7) Deep vein thrombosis | | | | | |
| 8) Pulmonary embolism | | | | | |
| 9) Arthritis | | | | | |
| 10) Strokes | | | | | |

Surgery:

Allergies:

Medications:

- | | |
|----|----|
| 1) | 5) |
| 2) | 6) |
| 3) | 7) |
| 4) | 8) |

Family history:

High blood pressure	Diabetes
Clotting	Bleeding
Strokes	

Personal:

Smoking	per/day	How long
Alcohol	per/day	How long
Occupation		