DR. PAULA D. MOORE
DYSAUTONOMIA CENTER

2470 Rocky Ridge Rd, Ste 200
Vestavia, AL 35243
P: (205) 286-3200
F: (205) 823-2465

New Patient Checklist

Please answer the following questions:

Reason/ Symptom: Do you currently experienced the following symptoms?

SYNCOPE (COLLAPSE)	YES ___ NO ___	LIGHTHEADEDNESS	YES ___ NO ___
TACHYCARDIA	YES ___ NO ___	PALPITATIONS	YES ___ NO ___
CHEST PAIN	YES ___ NO ___	SHORTNESS OF BREATH	YES ___ NO ___
BRAIN FOG	YES ___ NO ___	FATIGUE	YES ___ NO ___
ANXIETY	YES ___ NO ___	DEPRESSION	YES ___ NO ___

Have you had any of the following tests?

ECHO: YES ___ NO ___ WHEN: _____ WHERE: _____

STRESS TEST: YES ___ NO ___ WHEN: _____ WHERE: _____

TILT TABLE: YES ___ NO ___ WHEN: _____ WHERE: _____

Have you had a cardiology workup?

WHEN: _____ What is the name of the cardiologist or cardiology group: _____

_____

Have you seen any other physician for the evaluation of the above symptoms?

WHEN: _____ Name of physician and specialty: _____

_____

Notes: _____

_____