



Pre Health Check Questionnaire

Please return to:

admin.talbot@dorsetgp.nhs.uk



My Name _____



We would like to share information about you with other health care professionals,

Is this OK?



or



Are you getting help to complete this form?



or



If you are helped to complete this form who is helping you?

Name: _____

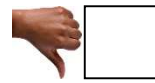
Who are they? Mum/dad/friend/helper etc: _____



Do you go to the dentist?



or



Last appointment: _____



Do you go to the optician?



or



Last appointment: _____



Do you go to the chiroprapist?



or



Last appointment: _____



Have you had your hearing checked?



or



Last appointment: _____



Do you have Epilepsy?



or



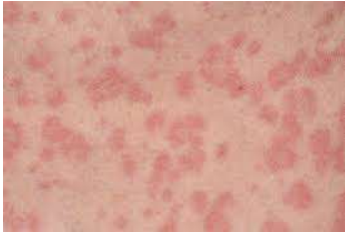
If yes, how many seizures do you have a month?



Do you have any pain and where is it?



Do any joints swell up and where do they swell?



Have you got a rash and where is it?



Do you sleep well?

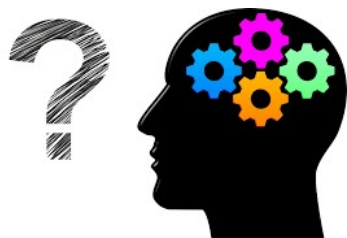


Have you put on or lost weight?



Can you breathe ok?

Do you have a cough all the time?



Is your memory ok or do you forget things?



If you take tablets does someone help you or do you take yourself?

Are they in a blister pack?



Anything else you want to tell us?



Do you have any problems going to the toilet?



or



If yes:

Do you have problems going for a wee (passing urine)?

or



Do you have problems going for a poo (passing a stool)?



or





Your Feelings



How are you feeling?



Do you have any worries?



Have you spoken to anyone for help about this?



Diet



Do you have problems with chewing or swallowing?



or





Do you have special dietary needs?



or





Have you seen a Speech & Language Therapist / Dietician?



or





My Lifestyle



Do you smoke? _____

Do you drink alcohol? _____

Do you want any information about this?



or





Do you exercise?



or

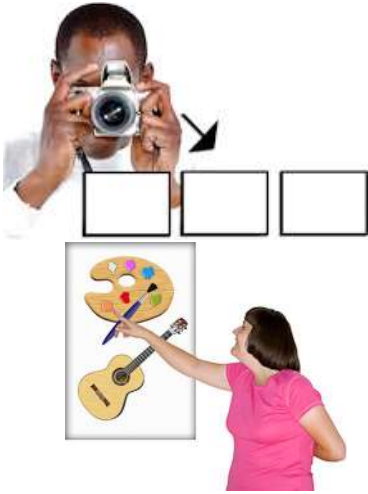


Do you have opportunities to exercise?



or





Do you have any hobbies?



or





Can you choose what you want to do?

or



Do you have a job?



or



Are you training for a job?



or





Do you live in your own house?



or



Are you getting support to do the things you want to?



or

