

BIOTE MALE HEALTH HISTORY & SYMPTOMS

PATIENT INFORMATION

Name: _____ Date: _____
Date of Birth: _____ Age: _____ Weight: _____ Height: _____

PATIENT QUESTIONS

- Currently trying to conceive? Yes No
- Desire to conceive in the future? Yes No
- Is patient on a 5-alpha reductase inhibitor? Yes No
- Is the patient on a PDE-5 Inhibitor (Cialis, Viagra, Etc.) Yes No
- Is the patient on any other testosterone boosting medication (Clomid, HCG, etc.)? Yes No
- Is the patient currently utilizing BHRT or HRT? Yes No
- If yes, select types of Hormones: Testosterone Thyroid
- List name and dose of hormone(s): _____
- Is the patient currently on statins? Yes No
- Is the patient a smoker? Yes No
- Is the patient currently on oral nitrates? Yes No

MEDICAL HISTORY

Select all that apply:

Fertility:

- Patient Wants to Maintain Fertility

Cardiovascular Conditions:

- Heart Attack or Stroke (within last 6 months)
- DVT or Blood Clot (within last 6 months)
- Hypertension
- Hyperlipidemia
- Obstructive Sleep Apnea
- Patient Takes Anticoagulant Medication
- Atrial Fibrillation
- Tachycardia

Cancer:

- Breast Cancer
- Active Prostate Cancer or History of Prostate Cancer
- Thyroid Cancer or History of Thyroid Cancer
- Meningioma
- Polycythemia Vera (PV)
- Except for Basal Cell Carcinoma any Other Cancers?

Neurological Conditions:

- Epilepsy or Seizure Disorder

Endocrine and Metabolic:

- Diabetes Type 2 or Insulin Resistance
- Hyperthyroid
- Hypothyroid
- Multiple Endocrine Neoplasia Type-2

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MEDICAL HISTORY

Autoimmune Conditions:

- Diabetes Type 1
- Hashimoto's Thyroiditis
- Graves' Disease
- Rheumatoid Arthritis
- Multiple Sclerosis
- Systemic Lupus (Erythematosus)
- Psoriasis
- Positive ANA
- IBS (Irritable Bowel Syndrome)
- Crohn's Disease
- Ulcerative Colitis

Organ Specific Conditions:

- Liver Disease or History of Liver Disease
- Kidney Disease or History of Kidney Disease
- LAM (Lymphangiomyomatosis)
- Osteoporosis or Osteopenia
- Prostate Enlargement (BPH)
- HIV
- Hepatitis
- Hemochromatosis
- Pancreatitis or History of Pancreatitis
- History of or Gall Bladder Disease

SYMPTOMS AND CONCERNS

Select all that apply:

- Acne
- Erectile Dysfunction (ED)
- Decreased Libido
- Decreased Desire
- Inability To or Delayed Orgasm
- Weight Gain
- Decreased Muscle Mass
- Difficulty Sleeping
- Urinary Incontinence
- Dry or Flaking Skin
- Lack of Energy (Fatigue)
- Decrease in Strength or Endurance
- Decrease in Work Performance
- Frequent Urinary Tract Infection
- Brittle Nails
- Thinning Eyebrows
- Hair Thinning
- Cold Hands or Feet
- Mind Racing at Bedtime
- Mood Swings
- Gynecomastia
- Abdominal Obesity