

Age: \_\_\_\_\_

### BOWEL HISTORY

Are you having problems with?

Yes No

Nausea		
Vomiting		
Heartburn		
Abdominal Pain		
Constipation		
Diarrhea		
Blood with Bowel Movement		
Jet Black Stool		
Fever		
Chills		
Unexpected Weight Loss		

### FAMILY HISTORY

Has anyone in your family had a colorectal cancer?

No Yes, whom? Mother Father  
Sister Brother  
Aunt Uncle  
Age onset: \_\_\_\_\_ Grandmother Grandfather

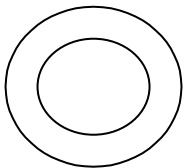
How often do you have bowel movements? \_\_\_\_\_ ( B.M.s/ day ).  
Hard? Soft? Medium? Loose? Vary?

Have you ever had an exam of the bowel before?

- Sigmoidoscopy Yes No
- Barium Enema Yes No
- Lower GI Yes No
- Colonoscopy Yes No

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NAD: Y N Alert: Y N Oriented x 4: Y N WNWD: Y N



Impression: \_\_\_\_\_

Recommendation: \_\_\_\_\_

- Educational Material Given / Program Initiated :
  - Fiber Therapy: Meta Citrucel
  - Fissure: Lido NTG
  - Hem: RBL Cream Supp
  - Hem: Non Op Cream Compress
  - Hem: Surgery Cream Supp
  - Pruritus Ani Lotrisone NTG Tucks
- Major Bowel Surgery: Educational Consent Process
  - CXR
  - C.T. Scan , PET, Rectal U/S
  - CEA, CBC, SMA12, PT, PTT
  - Refer Cardiology Clearance
- Obtain Old Record
- Review Labs, X-rays
- RTC PRN Symptoms Persist:
- RTC \_\_\_\_\_ Weeks---Re-eval & Flex Sigmoid
- Abscess/Fistula Educational Consent Process
  - Pilonidal Cyst Education Consent Process
  - Discussed Surgery: Post op instructions
  - Colonoscopy Educational Form Discussed:
- ACBE: V Colon
- Stool Cards and Instructions Given:
- Sigmoid Educational Screening Program