

Patient Interview Form (Orthopedics)

整形外科問診票

Date
YYYY/MM/DD

Patient's name
氏名

* If you have a referral letter, MRI or other test data, please submit it to the reception.

紹介状・MRI等は受付へ。

◎ When did your symptoms first appear? いつから症状があるか

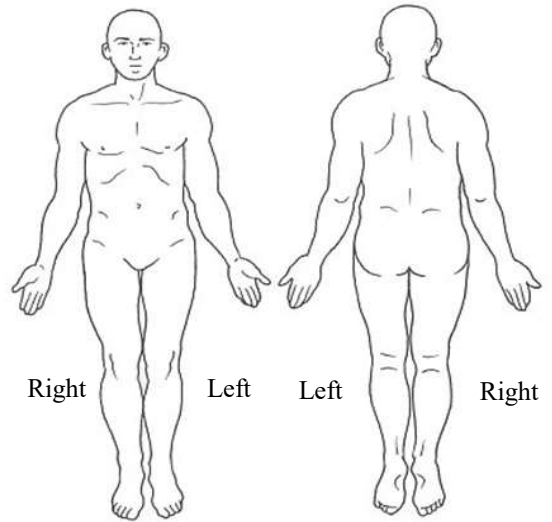
From

◎ Where do you have symptoms? どこが良くないか

Mark on right picture with below sign. 右図に印をつけてください

Pain	Enclose in a circle	痛み : ○
Numbness	Put on × sign	痺れ : ×
Other	Put on △ sign	他 : △

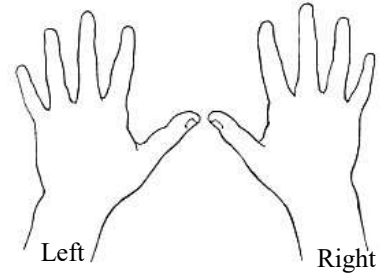
If you put △ sign : Describe about the symptom. △の詳細



◎ Do you have any idea why your symptoms occurred?

原因に心当たりがありますか?

- No いいえ
- Yes : Please describe the cause of the symptoms below. はい

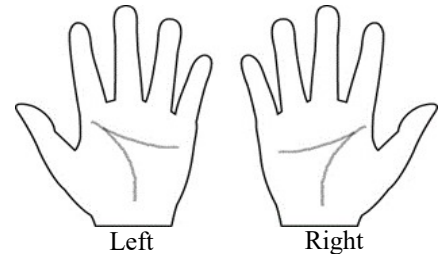


◎ Have you ever received any treatment for your symptoms? どこかで治療を受けたか

- No いいえ
- Yes : At _____ はい / 病院名

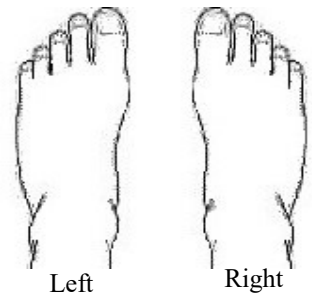
(Hospital, clinic or other medical facility's name)

Treatment detail such as oral medications, patch, injection, surgery, massage and so on.



◎ Are you currently being treated for any diseases? 現在治療中の病気

- No
- Yes : Hypertension 高血圧 Heart disease 心臓病
- Diabetes 糖尿病 Asthma 喘息
- Other その他 _____



◎ Have you ever had surgery before? 手術歴

- No
- Yes : _____

◎ Are you currently on medication? 現在服用中の薬

If you have the medication list, please submit to the reception.

- No
- Yes : _____



◎ Have you ever been told you have aspirin asthma?

アスピリン喘息と言われたことはありますか？

- No
 Yes

◎ Do you have any allergies?

アレルギーはありますか？

- No
 Yes

→

Medication (薬)
 Metal (金属)

)

Food (食べ物)
 Other (その他)

)

)

◎ Questions for women: Is there a possibility of pregnancy?

現在妊娠している可能性はありますか？

- No
 Yes

◎ Have you returned from abroad (countries except Japan) within 14 days?

14日以内の海外滞在歴

- No
 Yes

→

Which countries? Fill out all of them.

どこの国ですか？

◎ Is Your Long-term Care Insurance got certified as Support Care or Nursing Care? 要支援や要介護を受けていますか？

- No
 Yes

→

Support Care (You-Shien) 1 2
 Nursing Care (You-Kaigo) 1 2 3 4 5

要支援

要介護

◎ How did you know this hospital?

当院をどのようにして知ったか？

Referral from doctor

医師からの紹介

(Recommended by the doctor Asked the doctor for referral)

医師から/自分から

Referral from family member or acquaintance

家族・知人

Web searching

インターネット

TV programs, magazines, newspapers or books

テレビ、雑誌、新聞、本など

(Which programs, magazines or books?
どの番組、新聞、本などですか？)

Advertisement at stations or on buses

駅、バスなどの広告

(Which advertisement?
どの広告ですか？)

Other (その他)

◎ Question those who came to this hospital through internet search.

インターネットで検索された方へ

What was the deciding factor to visit this hospital (Multiple answers allowed)?

当院を受診する決め手

Large number of surgery cases 手術件数が多い

Many patients got better

良くなった患者が多い

Good description on the website ホームページの説明が良い

Various treatment methods

様々な治療法

Short hospitalization 入院が短い

Be able to return normal life soon

早期日常復帰

Less postoperative pain 術後の痛みが少ない

Short wait for surgery

手術まで待たない

Other 他

◎ Please fill in requests if you have.

ご要望があればご記入ください。

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Thank you for writing. Inanami Spine and Joint Hospital