REQUIRED FOR CHICAGO CAMPUS
CONFIDENTIAL HEALTH HISTORY AND PHYSICAL EXAM

PART 5 – To be Completed By Student

Last Name	First Name	Middle	Student ID	Date of Birth (mm/dd/yyy)

Please check all conditions you had or currently have and explain details in the box provided.

☐ Acne	☐ Diabetes	☐ Jaundice
☐ ADD/ADHD	☐ Dizziness	☐ Joint Pain
☐ AIDS/HIV	☐ Drug Addiction	☐ Kidney Disease
☐ Alcoholism	☐ Eating Disorder	☐ Mono
☐ Anemia	☐ Epilepsy	☐ Night Sweats
☐ Anxiety	☐ Eye Problems	☐ Pneumonia
☐ Arthritis	☐ Fainting	☐ Polio
☐ Asthma	☐ Frequent Headaches	☐ Rheumatic Fever
☐ Back Problems	☐ Frequent Indigestion	☐ Shortness of Breath
☐ Bladder Infections	☐ GERD	☐ Tuberculosis
☐ Bleeding Disorder	☐ Hearing Loss	☐ Thyroid Disorder
☐ Cancer	☐ Heart Problems	☐ Ulcers
☐ Chest Pain	☐ Hepatitis B	☐ Other (Specify)
☐ Chronic Cough	☐ Hernia	
☐ Concussion	☐ Hypertension	
☐ Depression	☐ Insomnia	

Please list the following:
Select "None" if Not Applicable

Explanation (Name of Condition and Treatment Information)
☐ None

Allergies (Please List All Below)
☐ Epi-Pen (Expiration Date) __/__/____ ☐ None

Surgeries (Operations)
☐ None

Routine Medications and Supplements/Herbal Remedies
☐ None

Permanent Disabilities
☐ None

PART 6 – To be Completed by a Physician*

REQUIRED FOR UNDERGRAD STUDENTS ONLY

Height	Weight	Appropriate Weight for Age/Height? ☐ Yes ☐ No	BP	Pulse	Blood Type (optional)

Physical Exam	Normal	Abnormal	Describe Abnormalities, Surgeries, Significant History
Skin			
Eyes, Ears, Nose, Sinuses			
Mouth, Throat, Tonsils			
Cardiovascular			
Respiratory			
Gastrointestinal			
Genito-Urinary			
Endocrine			
Musculo-Skeletal System			
Nervous System			
Psychiatric			
Menstrual History (Female Only)			☐ Oral Contraceptives (Specify)

Notes	Medications	Allergies

If any current condition or prescribed medication requires monitoring by lab tests please send a copy of the most recent lab work

Health Care Provider name	Title	Signature	Date

Address	Phone ( )	Fax ( )

*May also be completed by a Nurse Practitioner or Physician's Assistant