



Health History Form

Confidential

Patient Information:

First Name: _____ Last Name: _____ DOB: _____
 Today's Date: _____ Reason for Visit: _____

Symptoms (check all that apply)

General Wellness <input type="checkbox"/> Fatigue/daytime drowsiness <input type="checkbox"/> Sleep issues <input type="checkbox"/> Mood changes <input type="checkbox"/> Memory issues <input type="checkbox"/> Weight changes <input type="checkbox"/> Heat/cold intolerance <input type="checkbox"/> Dizziness/fainting <input type="checkbox"/> Weakness/fatigue <input type="checkbox"/> Other: _____	Digestive Health <input type="checkbox"/> Appetite changes <input type="checkbox"/> Bloating/gas <input type="checkbox"/> Heartburn <input type="checkbox"/> Constipation <input type="checkbox"/> Diarrhea <input type="checkbox"/> Nausea/vomiting <input type="checkbox"/> Hemorrhoids <input type="checkbox"/> Rectal bleeding <input type="checkbox"/> Difficulty swallowing <input type="checkbox"/> Other: _____	ENT & Vision <input type="checkbox"/> Frequent Colds <input type="checkbox"/> Sore throat <input type="checkbox"/> Vision changes <input type="checkbox"/> Ear ringing <input type="checkbox"/> Hearing loss <input type="checkbox"/> Nosebleeds <input type="checkbox"/> Sinus issues <input type="checkbox"/> Mouth sores <input type="checkbox"/> Gum bleeding <input type="checkbox"/> Other: _____	Men's Health: <input type="checkbox"/> Breast change <input type="checkbox"/> Erectile/sexual concerns <input type="checkbox"/> Testicular pain/lumps <input type="checkbox"/> Penis discharge/sores <input type="checkbox"/> Other: _____
Respiratory: <input type="checkbox"/> Persistent cough <input type="checkbox"/> Bloody cough <input type="checkbox"/> Wheezing <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Other: _____	Cardiovascular: <input type="checkbox"/> Chest discomfort <input type="checkbox"/> Palpitations <input type="checkbox"/> High/low BP <input type="checkbox"/> Swelling ankles <input type="checkbox"/> Poor circulation <input type="checkbox"/> Varicose veins <input type="checkbox"/> Other: _____	Muscles & Joints (pain/weakness/numbness): <input type="checkbox"/> Neck <input type="checkbox"/> Shoulders <input type="checkbox"/> Arms <input type="checkbox"/> Hands <input type="checkbox"/> Back <input type="checkbox"/> Hips <input type="checkbox"/> Legs <input type="checkbox"/> Feet	Women's Health: <input type="checkbox"/> Breast changes <input type="checkbox"/> Menstrual irregularities <input type="checkbox"/> Hot flashes <input type="checkbox"/> Vaginal symptoms <input type="checkbox"/> Sexual health concerns <input type="checkbox"/> Other: _____ <input type="checkbox"/> Last Period: _____ <input type="checkbox"/> Age at First Period: _____ <input type="checkbox"/> Pregnant: Yes/No
Skin & Hair: <input type="checkbox"/> Rash/itching/hives <input type="checkbox"/> Hair loss <input type="checkbox"/> Nail/skin color changes <input type="checkbox"/> Bruising/slow healing <input type="checkbox"/> Other: _____			
Genito-Urinary: <input type="checkbox"/> Frequent urination <input type="checkbox"/> Painful urination <input type="checkbox"/> Blood in urine <input type="checkbox"/> Bladder control issues <input type="checkbox"/> Other: _____			
Notes: 			

Elite Executive Package*

Diagnostic Testing

- **EKG** – Measures the electrical activity of the heart and screens for abnormal rhythms or signs of heart muscle damage, including heart attacks, arrhythmias or heart failure.
- **CARDIAC STRESS TEST** – A test that evaluates for blockages in the coronary arteries. Some heart problems only appear when the heart is working harder, so this test helps identify issues that may not show up at rest.
- **BONE DENSITY TEST** – Measures bone strength and the risk of fractures or osteoporosis. Bone loss can occur with age, certain medical conditions, or lifestyle factors such as smoking. Knowing your bone density helps guide prevention and treatment.
- **BODY FAT ANALYSIS** – Uses the same technology as the bone density test to measure body composition, including body fat percentage and lean muscle mass. It distinguishes between surface fat and deeper fat around organs.
- **SPIROMETRY** – A respiratory test that evaluates your lung function by measuring capacity and detecting airflow blockages from conditions such as asthma, chronic bronchitis, or emphysema.
- **HEARING TEST** – A screening test to identify possible hearing loss.
- **AORTA SCAN** – Screens for an abdominal aortic aneurysm (AAA), a weakening of the aortic wall. Risk factors include obesity, smoking, age over 65, and high blood pressure. Early detection is important because rupture can be life-threatening.
- **BLADDER SCAN** – Measures how much urine remains in the bladder after voiding. High residual volume may be related to incontinence, urinary tract infections, enlarged prostate, or neurologic conditions.

Laboratory Testing

COMPREHENSIVE LABS

Diabetes Screen – Evaluates blood glucose levels and long-term sugar control to identify individuals who have or are at risk of diabetes.

Cardiac Risk Evaluation – Checks an individual's complete cholesterol panel, along with specialized lipid tests and markers of cardiac inflammation, all of which check risk for heart disease and stroke.

Kidney Health – Measures an individual's blood electrolytes, creatinine level, and kidney function including any spillage of microproteins into the urine. Kidney health is important for blood pressure, detoxification, and the body's water balance.

Liver Health – Measures the function of an individual's liver cells, including metabolism, detoxification, and proper blood clotting and screens for Hepatitis C exposure.

Immune Health Assessment – Checks a patient's white blood cells and measures any immune-related body inflammation, while screening HIV exposure.

Men's health – Screens for low testosterone which may affect one's energy, libido, and metabolism. PSA levels are also measured to provide an indication of an individual's risk for prostate cancer.

Thyroid disorder screening – Checks the function of an individual's thyroid gland which regulates metabolism.

Celiac disease screening – Screens for celiac disease, which results in one's inability to eat gluten-containing foods. Gastrointestinal symptoms such as bloating, upset stomach, or diarrhea may be signs of underlying celiac disease.

Gout Screen – Checks one's blood uric acid level which is an indicator of one's risk for developing gout arthritis.

Basic Minerals and Vitamins - Measures blood levels of Vitamin B12, D, folic acid, magnesium, and also evaluates the body's Iron levels and its capacity to store it.

****No deductions will be made for any services declined, as these packages are already offered at a significant discount.***



At Coral Gables Executive Physicians, we want our patients to have access to the highest quality pharmaceutical-grade natural supplements available in the market today. Many of these products can improve quality of life and reduce the risk of many chronic diseases. We have researched what we feel are the top products from several different nutraceutical companies.

For every order we place, a portion of the proceeds is donated to a charity, educational institution or cause of our choosing in the name of Coral Gables Executive Physicians. We do not make a profit from the sale of any of these products. Please check the list below for any products you might be interested in and mark the appropriate box so that we may give you more information.

- Safely decreasing fat mass while increasing muscle mass
- Reduce the risk of cancer
- Lower cholesterol levels
- Decrease wrinkles, strengthen nails, grow hair
- Reduce menopausal hot flashes by up to 70%
- Easy to take supplements that provide the daily recommendation of fruits and/or vegetables for those that don't get 7-10 servings daily in their diet
- Meal replacement products and protein supplements
- The highest quality omega-3 fish oils
- General multivitamin supplementation
- Reduce the effects of stress on the body
- Reduce the risk of developing dementia
- Strengthen the immune system
- Antioxidant supplements which may reduce the risk of conditions such as cancer, heart disease and neurologic conditions
- Reduce the symptoms of premenstrual syndrome (PMS)
- Anti-aging regimen for those interested in slowing the aging process

Sleep Apnea Questionnaire

Completely fill in one circle for each question - answer all questions

Have you been diagnosed or treated for any of the following conditions?

High blood pressure	<input type="radio"/> Yes	<input type="radio"/> No	Stroke	<input type="radio"/> Yes	<input type="radio"/> No
Heart Disease	<input type="radio"/> Yes	<input type="radio"/> No	Depression	<input type="radio"/> Yes	<input type="radio"/> No
Diabetes	<input type="radio"/> Yes	<input type="radio"/> No	Sleep Apnea	<input type="radio"/> Yes	<input type="radio"/> No
Lung Disease	<input type="radio"/> Yes	<input type="radio"/> No	Nasal oxygen use	<input type="radio"/> Yes	<input type="radio"/> No
Insomnia	<input type="radio"/> Yes	<input type="radio"/> No	Restless leg syndrome	<input type="radio"/> Yes	<input type="radio"/> No
Narcolepsy	<input type="radio"/> Yes	<input type="radio"/> No	Morning Headaches	<input type="radio"/> Yes	<input type="radio"/> No
Sleeping Medication	<input type="radio"/> Yes	<input type="radio"/> No	Pain Medication e.g., vicodin, oxycontin	<input type="radio"/> Yes	<input type="radio"/> No

Epworth Sleepiness Scale: How likely are you to doze off or fall asleep in the following situations, in contrast to just feeling tired? This refers to your usual way of life in recent times. Even if you have not done some of these things recently, try to work out how they would have affected you. Use the following scale to mark the most appropriate box for each situation. (M.W. Johns, Sleep 1991)

0=would never doze 1=slight chance of dozing 2=moderate chance of dozing 3=high chance of dozing

	0	1	2	3
Sitting and reading	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Watching TV	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sitting, inactive, in a public place (theater, meeting, etc)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
As a passenger in a car for an hour without a break	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lying down to rest in the afternoon when circumstances permit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sitting and talking to someone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sitting quietly after lunch without alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In a car, while stopped for a few minutes in traffic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Frequency 0-1 times/week 1-2 times/week 3-4 times/week 5-7 times/week

On average in the past month, how often have you snored or been told that you snored?	Never <input type="radio"/>	Rarely <input type="radio"/> +1	Sometimes <input type="radio"/> +2	Frequently <input type="radio"/> +3	Almost always <input type="radio"/> +4
Do you wake up choking or gasping?	Never <input type="radio"/>	Rarely <input type="radio"/> +1	Sometimes <input type="radio"/> +2	Frequently <input type="radio"/> +3	Almost always <input type="radio"/> +4
Have you been told that you stop breathing in your sleep or wake up choking or gasping?	Never <input type="radio"/>	Rarely <input type="radio"/> +1	Sometimes <input type="radio"/> +2	Frequently <input type="radio"/> +3	Almost always <input type="radio"/> +4
Do you have problems keeping your legs still at night or need to move them to feel comfortable?	Never <input type="radio"/>	Rarely <input type="radio"/>	Sometimes <input type="radio"/>	Frequently <input type="radio"/>	Almost always <input type="radio"/>

Signature	Area Code Phone Number	Total all 6 boxes from above if point total = 4 or 5 (low risk), 6 to 10 (high) and 11 or more (very high risk)	Point Total
			<input style="width: 40px; height: 30px;" type="text"/>

Co-morbidities
+1 for each Yes
response

Score

Do not assign
any points for
these eight
responses

Epworth Score
TOTAL the
values from all
8 questions,
if 11 or less
Score=0
if 12 or more
Score=2

Score

Assign points for
each of the first
three responses

At CGEP, we go far beyond the standard physical. Our advanced diagnostic menu gives you a **comprehensive, data-driven picture of your health** — detecting disease earlier, identifying hidden risks, and empowering you to make better decisions for your future.

B L O O D , I M M U N E & M E T A B O L I C

Biophysical Test

Covers 120 disorders — autoimmune diseases, cancers, heart disease, stroke, diabetes, hormone imbalance, organ function, and infectious diseases.

Micronutrient Test

Measures 33+ vitamins, minerals & antioxidants at the cellular level. Identifies deficiencies linked to arthritis, cancer, diabetes & more.

Stress Hormone Profile

Evaluates adrenal gland function — detecting overload or burnout — and guides targeted hormonal restoration.

C A N C E R D E T E C T I O N & G E N E T I C S

Galleri — Multi-Cancer Screen

Detects signals for 50+ types of cancer with a single blood draw. Identifies where in the body the signal originates. Recommended for elevated-risk adults.

Natera — Hereditary Cancer

Screens 53 genes associated with 12+ hereditary cancers. Guides screening frequency, informs treatment decisions, and alerts family members.

New Amsterdam — Full Genome

Analyzes all 22,000 human genes for mutations. Delivers personalized diet, exercise & lifestyle recommendations based on your unique DNA.

C A R D I O V A S C U L A R

CIMT

Ultrasound detecting arterial wall thickening — the earliest sign of cardiovascular disease — well before a stroke or heart attack occurs.

Echocardiogram

Advanced 30-minute noninvasive cardiac imaging. Diagnoses heart failure and valve disorders. Results reviewed by a board-certified cardiologist.

ECG Monitor — Up to 14 Days

Compact, wireless, wearable. Captures EKG data for up to 14 days with high clinical accuracy. Diagnoses palpitations, dizziness & arrhythmias.

24-Hour BP Monitor

Continuous blood pressure tracking day and night. Accurately diagnoses hypertension or hypotension missed by single office readings.

G U T H E A L T H & D I G E S T I O N

Food Sensitivity Testing

Evaluates sensitivity to 150+ foods. Identifies triggers for digestive issues, migraines, fatigue, joint pain, rashes & weight gain from chronic inflammation.

P88 Dietary Antigen

Measures four immune reactions (IgE, IgG, IgG4, complement) to 88 foods. Ranks each food by reactivity and provides personalized diet plans.

Comprehensive Stool Analysis

Evaluates digestion, absorption, gut flora & the colonic environment. Tests for parasites and infections. Ideal for chronic GI issues or changes in bowel patterns.

Intestinal Barrier Assessment

Measures Zonulin, DAO, Histamine, LPS IgG & LPS IgA. Diagnoses leaky gut and tracks improvement across the three primary permeability pathways.

SIBO — Bacterial Overgrowth

Breath test detecting hydrogen & methane levels. Identifies small intestinal bacterial overgrowth, a common cause of bloating and chronic GI distress.

T O X I N S & E N V I R O N M E N T A L E X P O S U R E

Toxin Profile

Screens 173 environmental pollutants from a single urine sample. Linked to heart disease, autoimmune disorders, chemical sensitivity, and cancer.

Mycotox Profile — Mold

Screens for 11 mycotoxins from 40 species of mold in one urine sample. Mold toxins are among the most prevalent environmental toxins affecting chronic health.

Heavy Metal Urinalysis

Analyzes 20+ heavy metal toxicants including mercury & lead. Assesses total body burden and toxic overload affecting cardiovascular & neurological health.

Airborne Allergy Panel

Measures IgE reactions to 85 environmental allergens — far more comprehensive than standard inhalant allergy tests.