

Chief Complaint(s):

H.P.I.

Location of the problem

Describe the problem

Severity of the problem

Mild Moderate Severe

When did you notice the problem?

Does anything help or make the problem worse?

How long does it last?

Always there

Does the problem interfere with your normal functions?

Yes No

Do you have any of these urinary symptoms?

None Frequency Painful Urination
 Urgency Sense of not emptying my bladder
 Urinating at night Urinary Incontinence

Notes and other information