



## Question and Answer Sheet

Questions	Answers
1. Why did the patient come?	<ul style="list-style-type: none"> <li>a. Sore neck</li> <li>b. Sore hands</li> <li>c. Sore head</li> </ul>
2. When did the problem start?	<ul style="list-style-type: none"> <li>a. Two weeks ago</li> <li>b. Three weeks ago</li> <li>c. Four weeks ago</li> </ul>
3. Does the patient have a good appetite?	<ul style="list-style-type: none"> <li>a. Yes</li> <li>b. No change</li> <li>c. Not really hungry</li> </ul>
4. Did she lose weight?	<ul style="list-style-type: none"> <li>a. 5 lbs</li> <li>b. 10 lbs</li> <li>c. 0 lbs</li> <li>d. Not sure</li> </ul>
5. Allergies to food ?	<ul style="list-style-type: none"> <li>a. Chicken</li> <li>b. Milk products</li> <li>c. No allergies</li> <li>d. Both chicken and milk products</li> </ul>
6. Allergies to medicine?	<ul style="list-style-type: none"> <li>a. Some drugs</li> <li>b. No allergies</li> <li>c. Sulphur drugs</li> <li>d. Sulpha drugs</li> </ul>
7. Did she take any medication?	<ul style="list-style-type: none"> <li>a. Tylenol</li> <li>b. Advil</li> <li>c. Anvil</li> <li>d. Aspirin</li> </ul>
8. How does she feel	<ul style="list-style-type: none"> <li>a. Somewhat better</li> <li>b. Not better</li> <li>c. Much better</li> <li>d. Better</li> </ul>
9. When did she take the last does?	<ul style="list-style-type: none"> <li>a. Yesterday morning</li> <li>b. This morning</li> <li>c. Every morning</li> <li>d. Some mornings</li> </ul>