



TN Vascular & Thoracic Surgical Associates, PC
1801 N. Washington St.-Ste.200
Tullahoma, TN 37388
(931)-841-3948/ph (931)-841-3906/fax

Patient Name: _____ **Date:** _____

- 1. Do you have a family history of diabetes or cardiovascular problems (high blood pressure, heart attack, stroke)?** Yes No

- 2. Do you have any of these symptoms:**
 - Aching, cramping or pain in the legs when you walk or exercise, which disappears after rest? Yes No
 - Occasional tingling, numbness or coldness in your hands or feet? Yes No
 - Do you have any ulcers or wounds on your toes, feet or legs that are slow to heal? Yes No

- 3. Do you experience impotence (men)?** Yes No

- 4. Do you currently smoke or have you ever smoked?**
Yes No

- 5. Do you live a sedentary lifestyle (NOT exercise regularly)?** Yes No

- 6. Do you eat fried or fatty foods three times a week or more?** Yes No



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