CHECK LIST OF CURRENT SYMPTOMS: This is not meant to be used as a diagnostic scheme, but is provided to streamline the office interview. Note the formal-complaints referable to the specific organ systems and specific co-infections are clustered to clarify and to better display multisystem involvement.

Have you had any of the following in	relation	n to this	illness? (CIRCLE "NO" OR "	YES)	
Tick bite	Ν	Y	"EM" rash (discrete circle)	N	Υ
Spotted rash over large area	Ν	Y	Linear, red streaks	Ν	Υ

	CURRENT		SEVERITY		CURRENT		FREQUENCY		
SYMPTOM OR SIGN	None	Mild	None	Mild	NA	Mild	None	Mild	None
Persistent swollen glands									
Sore throat									
Fevers									
Sore sole of foot, esp. in AM									
Joint pain									
Fingers, toes									
Ankles, wrists									
Hips, shoulders									
Joint swelling									
Fingers, toes									
Ankles, wrists									
Hips, shoulders									
Fingers, toes									
Unexplained back pain									
Stiffness of the joints or back									
Muscle pain or cramps									
Obvious muscle weakness									
Twitching of the face or other muscles									
Confusion, difficulty thinking									
Difficulty with concentration, reading,									
problem absorbing new information									
Word search, name block									
Forgetfulness, poor short term memory, poor attention									
Disorientation: getting lost, going to wrong places									
Speech errors-wrong word, misspeaking									
Mood swings, irritability; depression									
Anxiety, panic attacks									
Psychosis (hallucinations, delusions, paranoia, bipolar)									
Tremor									

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	CURRENT		SEVERITY		CURRENT		FREQUE		ENCY	
SYMPTOM OR SIGN	None	Mild	Moder.	Severe	NA	Never	Occas.	Often	Constant	
Seizures										
Headache										
Light sensitivity										
Sound sensitivity										
Vision: double, blurry, floaters										
Ear pain										
Hearing: buzzing, ringing, decrease										
hearing										
Increased motion sickness, vertigo										
spinning										
Off balance, "tippy" feeling										
Lightheadedness: wooziness, unavoidable need to sit or lie										
Tingling, numbness, burning or stabbing sensations, shooting pains, skin hypersensitivity										
Facial paralysis – Bell's Palsy										
Dental pain										
Neck creaks and cracks, stiffness, neck					1			l		
pain										
Fatigue, tired, poor stamina										
Insomnia, fractionated sleep, early awaking										
Excessive night time sleep										
Napping during the day										
Unexplained weight gain										
Unexplained weight loss										
Pain in genital area										
Unexplained menstrual irregularity										
Unexplained milk production; breast pain										
Irritable bladder or bladder dysfunction										
Erectile dysfunction										
Loss of libido										
Queasy stomach or nausea										
Heartburn, stomach pain										
Constipation										
Diarrhea										
Low abdominal pain, cramps										
Heart murmur or valve prolapsed?										
Heart palpitations or skips										
"Heart block" on EKG	1									
Chest wall pain or ribs sore										
Head congestion					Ì					
Breathlessness, "air hunger", unexplained					1					
chronic cough										
Night sweats										
Exaggerated symptoms or worse hangover										
from alcohol Symptoms flares every 4 weeks					+					
Degree of disability										
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