KNEE EVALUATION

1. What was your chief complaint when you visited your doctor?

2. What do you think caused the problem?

3. What does your doctor think is causing your knee problem?

4. Describe your pain:
   a. Does anything make it worse?
   b. Does anything make it better?

5. Do you have any weakness?

6. Have you ever injured your knee? Date of injury

7. Have you had surgery or arthroscopy to the area being scanned today? When? What was done?

8. Have you ever broken any bones in your knee?

9. Have you ever dislocated your knee?

10. Do you have arthritis in any of your joints?

11. Do you have any other medical conditions?

12. Are you taking any medicines? What kind?

13. Describe your general health: