## **PATIENT QUESTIONNAIRE**

## **IBD Patient Screener**



Discovering you have Inflammatory Bowel Disease can be overwhelming, both physically and emotionally.

Because it's often difficult for patients to discuss bowel issues, the following questions are designed to help those living with bowel conditions better communicate their symptoms and concerns. Please complete this questionnaire to assist your doctor in the diagnosis of your particular condition.

1.	Have you noticed a change in your bowel habits recently?	ΠY	Ν
2.	Do you have constipation?	ΠY	Ν
3.	Diarrhea?	ΠY	Ν
4.	Blood in the stool?	ΠY	Ν
5.	Mucus in the stool?	ΠY	Ν
6.	Very narrow stool?	ΠY	Ν
7.	Rectal bleeding?	ΠY	Ν
8.	The feeling like you haven't had a complete bowel movement?	ΠY	Ν
9.	Abdominal pain?	ΠY	Ν
10.	Unusual or persistent gas or gas pains?	ΠY	Ν
11.	Fever?	ΠY	Ν
12.	Loss of appetite?	ΠY	Ν
13.	Unexpected or frequent nausea or vomiting?	ΠY	Ν
14.	Recent, unexpected weight loss or gain?	ΠY	Ν
15.	Unusual or ongoing fatigue?	ΠY	Ν
16.	Skin rashes?	ΠY	Ν
17.	Inflammation of the eye?	ΠY	Ν
18.	Joint pain?	ΠY	Ν
19.	Mouth ulcers or sores?	ΠY	Ν
20	. Do you have a family history of bowel heath diagnoses like IBD or IBS?	ΠY	Ν
21.	Have you seen a doctor before for bowel symptoms? ☐ Primary ☐ Specialist ☐ None		
22	. Did you receive a diagnosis for your bowel symptoms?	ΠY	Ν
23	. How long have your symptoms occurred?		
24	. Have your symptoms' severity changed? ☐ Increased ☐ Decreased ☐ Stayed the same		
25	. What (if any) treatments have you tried?		