



Women's Sports Medicine Center

Confidential Medical History

Name Jeffrey Epstein Age 63 Birthdate [REDACTED]
 Home # [REDACTED] Work # [REDACTED]
 Occupation Banker Referred by Dr. Bruce Moskowitz

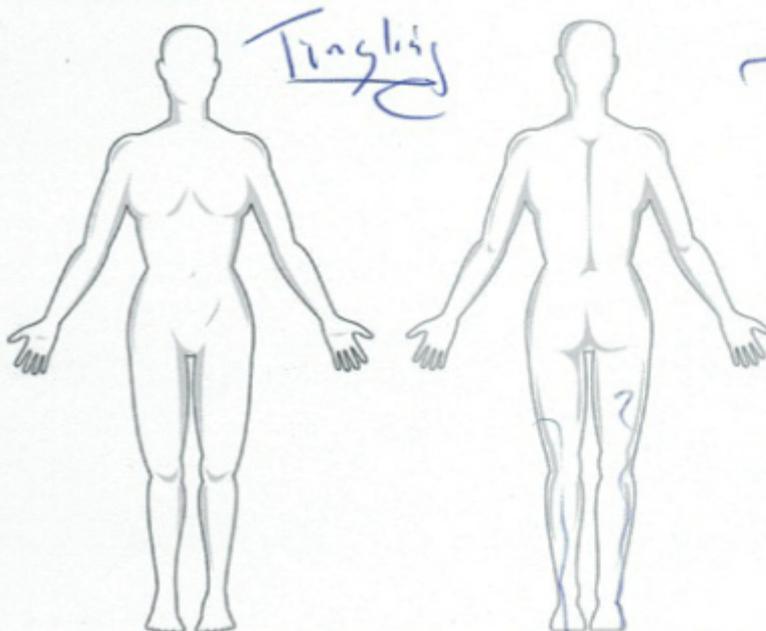
Right Handed Left Handed

Chief Complaint Intermittent claudication on walking

Date of injury or onset of symptoms _____

Describe the injury or problem Numbness on walking

Where is your pain? Please mark the drawing.



Rate Your Pain:

0 = No pain 10 = Extreme pain

1. Right now
 2. At best
 3. At worst

4. What makes it better? _____

5. What makes it worse? _____

Have you had any of the following tests or treatments for this problem? (please check)

Tests	Date(s) of your tests	Treatments (If so, describe whether they helped.)
<input type="checkbox"/> X-RAY	_____	<input type="checkbox"/> MEDICATIONS _____
<input checked="" type="checkbox"/> MRI	<u>10-14-2015</u>	<input type="checkbox"/> INJECTIONS _____
<input type="checkbox"/> CT SCAN	_____	<input type="checkbox"/> SURGERY _____
<input type="checkbox"/> MYELOGRAM	_____	<input type="checkbox"/> PHYSICAL THERAPY _____
<input type="checkbox"/> BONE SCAN	_____	<input type="checkbox"/> OTHER TESTS AND TREATMENTS _____