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Deep Venous Screening Questionnaire

1. Do you have any of the following symptoms that worsens, specifically as the day goes on, and with prolonged sitting or standing? Typically, but not always, these symptoms will decrease to some degree with leg elevation.

- Abdominal bloating or gassiness
Abdominal distention of fullness
Severe menstrual pain
Pain during intercourse calf
Pain that increases during exercise, specifically in the calf or back of the thigh.
Hip pain
Leg numbness or cramping?
Sciatica or Buttock pain?
Pain behind the knee, and in the

All of these symptoms are potentially caused by blood pooling in the pelvic and abdominal area, and are often very easy to fix if this is the cause.

2. Have you ever had any testing for these symptoms?

- X ray
MRI
CT scan
Nerve testing

3. Has any of the testing found a cause for the problem?

4. Have you been diagnosed with any cause for these symptoms other than what was found on testing?

5. Have you had any other procedures or taken any medication for these symptoms? Please state:

6. Has any of this treatment been effective in alleviating the cause of your symptoms?

7. Have you ever had a blood clot or DVT?