

Tobacco Consumption (Circle One)

1. None
2. Less than 1 pack of cigarettes per week
3. Approximately 1/2 pack of cigarettes per day
4. Approximately 1 pack of cigarettes per day

Alcohol Consumption (Circle One)

1. None
2. 1-2 'drinks or beers per week
3. 4-5 drinks or beers per week
4. More than 6 Drinks or beers per week

Family Medical History: (Circle One)

1. Both parents living and well
2. One parent deceased; caused by: \_\_\_\_\_
3. Both parents deceased; caused by: \_\_\_\_\_  
and by: \_\_\_\_\_ .

Is There a Family History of: (Circle)

1. Heart Attacks Y N Details If Yes: \_\_\_\_\_
2. Diabetes Y N Details If Yes: \_\_\_\_\_
3. Urinary stones Y N Details If Yes: \_\_\_\_\_
4. Kidney problems Y N Details If Yes: \_\_\_\_\_
5. Prostate cancer Y N Details If Yes: \_\_\_\_\_
6. Bladder cancer Y N Details If Yes: \_\_\_\_\_
7. Kidney cancer Y N Details If Yes: \_\_\_\_\_
8. Bladder problems Y N Details If Yes: \_\_\_\_\_

Patient Height: \_\_\_\_\_ Patient Weight: \_\_\_\_\_