

Ear, Nose Throat

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Any known allergy to foods? Y N If yes, what?

Any known allergy to animals? Y N If yes, what?

Please mark the situations that apply to you.

Symptoms of Pollen Allergy:

- Y N Symptoms aggravated by being outdoors (in general)
- Y N Symptoms aggravated by being outdoors on windy days
- Y N Symptoms improved by air conditioning

Symptoms of Dust Allergy:

- Y N Symptoms aggravated in air conditioning
- Y N Symptoms improved outdoors
- Y N Nasal symptoms with little or no itching of the eyes
- Y N Symptoms aggravated by being indoors
- Y N Symptoms aggravated by dust (being around dust mites, dusting or sweeping)

Symptoms of Mold Allergy:

- Y N Symptoms aggravated by smelling or touching cut grass
- Y N Symptoms increased in the fall months
- Y N Symptoms aggravated by being outdoors

Miscellaneous:

- Y N Symptoms aggravated by pollens
- Y N Aggravated by aromas of soaps, detergents, and cleaners
- Y N Aggravated by animal exposure
- Y N Symptoms aggravated by cigarette smoke
- Y N Symptoms aggravated by exercise
- Y N Symptoms aggravated by perfumes
- Y N Symptoms aggravated by smoke/fumes

SINO-NASAL OUTCOME TEST

Name

Today's Date

Please rate your symptoms 0-5 (0 being no presence of symptom and 5 being the highest degree of symptom)

Itchy Eyes/Watery Eyes	0	1	2	3	4	5
Runny Nose	0	1	2	3	4	5
Itchy Nose	0	1	2	3	4	5
Sneezing	0	1	2	3	4	5
Diagnosed Asthma	0	1	2	3	4	5
Wheezing	0	1	2	3	4	5
Cough	0	1	2	3	4	5
Sore Throat	0	1	2	3	4	5
Post Nasal Drip	0	1	2	3	4	5
Thick Nasal Discharge	0	1	2	3	4	5
Smell/Taste Disorder	0	1	2	3	4	5
Nasal Congestion	0	1	2	3	4	5
Ear Pressure/Fullness	0	1	2	3	4	5