

## Do I Need a Test for PAD?

Peripheral Arterial Disease (PAD) is a serious circulatory problem in which the blood vessels that carry blood to your arms, legs, brain and kidneys, become narrowed or clogged. It affects over 8 million Americans, most over the age of 50. It may result in leg discomfort with walking, poor healing of leg sores/ulcers, difficult to control blood pressure, or symptoms of stroke. People with PAD are at significantly increased risk for stroke and heart attack. Answers to these questions will determine if you are a risk for PAD and if a Vascular exam will help us better assess your vascular health status.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Please put a check mark to the Questions you can answer with a Yes.

- \_\_\_\_\_ Do you have foot, calf, buttock, hip, or thigh discomfort (aching, fatigue, tingling, cramping, or pain) when you walk which is relieved by rest?
- \_\_\_\_\_ Do you experience any pain at rest in your lower leg(s) or feet?
- \_\_\_\_\_ Do you experience foot or toe pain that often disturbs your sleep?
- \_\_\_\_\_ Are your toes or feet pale, discolored or blue-ish?
- \_\_\_\_\_ Do you have skin wounds or ulcers on your feet or toes that are slow to heal?
- \_\_\_\_\_ Do you have an infection of the leg(s) or feet that may be gangrenous (black skin)?
- \_\_\_\_\_ Do you have bad circulation?
- \_\_\_\_\_ Are you a diabetic?
- \_\_\_\_\_ Do you depend on insulin?
- \_\_\_\_\_ Are you over 50?
- \_\_\_\_\_ Have you smoked or used tobacco products in the last ten years?
- \_\_\_\_\_ Have you ever had a cholesterol problem?
- \_\_\_\_\_ Have you ever been diagnosed as having high blood pressure or hypertension?
- \_\_\_\_\_ Do you use medication to control any of the above problems? If so, How many? \_\_\_\_\_
- \_\_\_\_\_ Have you ever had heart problems?
- \_\_\_\_\_ Have you ever had a stroke?
- \_\_\_\_\_ Have you ever had a blood clot?
- \_\_\_\_\_ Do you have asthma or any other breathing problems?
- \_\_\_\_\_ Has your doctor ever told you that you have diminished / absent pedal (foot) pulses?
- \_\_\_\_\_ Do you have or have you ever had kidney problems?
- \_\_\_\_\_ Have you ever had Dialysis?

Reviewed by Dr. \_\_\_\_\_ Date \_\_\_\_\_  
(Signature)