

Physical Health Assessment Form Sample

A **physical health assessment form** sample provides a structured template to evaluate an individual's overall health status, focusing on vital signs, medical history, and current physical condition. It is essential for healthcare providers to gather accurate information and identify potential health risks promptly. Utilizing such a form ensures a comprehensive and systematic approach to physical health evaluation.

Personal Information	
Full Name: <input type="text"/>	
Date of Birth: <input type="text"/>	
Gender: <input type="text"/> Select <input type="button" value="▼"/>	
Vital Signs	
Height (cm): <input type="text"/>	
Weight (kg): <input type="text"/>	
Blood Pressure (mmHg): <input type="text"/> e.g. 120/80	
Pulse Rate (bpm): <input type="text"/>	
Temperature (°C): <input type="text"/>	
Medical History	
Past Illnesses / Surgeries: <input type="text"/>	
Current Medications: <input type="text"/>	
Known Allergies: <input type="text"/>	
Physical Examination	
General Appearance: <input type="text"/>	
Cardiovascular Assessment: <input type="text"/>	
Respiratory Assessment: <input type="text"/>	
Abdominal Assessment: <input type="text"/>	
Musculoskeletal Assessment: <input type="text"/>	
Assessment Summary & Recommendations	
<input type="text"/> Summarize the assessment and provide recommendations...	

Submit Assessment