



# Orange County Migraine & Wellness Center

## HEADACHE / MIGRAINE HISTORY

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

Date of Birth : \_\_\_\_\_

Years experiencing headache/migraine : \_\_\_\_\_

### Headache / Migraine Frequency

About how many **days per month** are you completely **headache/migraine free** (No headache at all)? \_\_\_\_\_

On average, how many **hours per day** do your headaches/migraines last?

0 – 3

4 – 7

8 – 11

12+

Over the **past 3 months**, how has your headache/migraine **frequency changed**?

Getting them more often

Getting them less often

No change

### Headache / Migraine Symptoms

What **symptoms** do you normally have with your headaches/migraines? ( Check all that apply )

Moderate or severe pain

Nausea

Vomiting

Sensitivity to light

Sensitivity to sound

Pain on one side or in specific areas

On average, how many **days per month** do you have one or more of these headache/migraine symptoms?

0 – 4

5 – 9

10 – 14

15+

On average, **how painful** are your headaches/migraines?

Not very painful

Somewhat painful

Painful

Very Painful

### How Headache / Migraine Affects Your Daily Life

How many days last month did you **miss work or school** due to headaches/migraines?

0

1 – 2

3 – 4

5+

How many days last month did you **cancel plans** due to headaches/migraines?

0

1 – 2

3 – 4

5+

How many times last year did you **go to the ER** because of headaches/migraines?

0

1 – 2

3 – 4

5+

Over the **past 3 months**, how do you feel your headache/migraine preventive treatments are working?

Not at all

Not well

Average

Well

Very well

## Preventative Treatments

Please check off any preventative medications you currently use or have used in the past to reduce the frequency and severity of your headaches or migraines.

<b>Antidepressants</b>	<input type="radio"/> Celexa <input type="radio"/> Lexapro <input type="radio"/> Paxil <input type="radio"/> Prozac <input type="radio"/> Zoloft	<input type="radio"/> Elavil (amitriptyline) <input type="radio"/> Pamelor (nortriptyline) <input type="radio"/> Cymbalta (duloxetine) <input type="radio"/> Effexor <input type="radio"/> Pristiq	<input type="radio"/> Wellbutrin <input type="radio"/> Savella <input type="radio"/> Remeron <input type="radio"/> Viibryd <input type="radio"/> Trazodone
<b>Antiseizure</b>	<input type="radio"/> Depakote (divalproex sodium) <input type="radio"/> Dilantin (phenytoin) <input type="radio"/> Keppra (levetiracetam) <input type="radio"/> Lamictal (lamotrigine) <input type="radio"/> Lyrica (pregabalin)	<input type="radio"/> Neurontin (gabapentin) <input type="radio"/> Tegretol (carbamazepine) <input type="radio"/> Trileptal (oxcarbazepine) <input type="radio"/> Topamax (topiramate) <input type="radio"/> Trokendi XR (topiramate)	<input type="radio"/> Qudexy XR (topiramate) <input type="radio"/> Zonegran (zonisamide)
<b>Beta-blockers</b>	<input type="radio"/> Propranolol	<input type="radio"/> Metoprolol	<input type="radio"/> Timolol
<b>Calcium Channel Blocker</b>	<input type="radio"/> Flunarizine	<input type="radio"/> Verapamil	
<b>Other</b>	<input type="radio"/> Abilify <input type="radio"/> Lithium <input type="radio"/> Klonopin (clonazepam) <input type="radio"/> Zanaflex (tizanidine) <input type="radio"/> Nerve Blocks <input type="radio"/> Ajovy <input type="radio"/> CoQ10 <input type="radio"/> Magnesium <input type="radio"/> Doxycycline <input type="radio"/> Singulair (montelukast)	<input type="radio"/> Vraylar <input type="radio"/> Seroquel <input type="radio"/> Ativan (lorazepam) <input type="radio"/> Xanax (alprazolam) <input type="radio"/> Flexeril (cyclobenzaprine) <input type="radio"/> Botox injections <input type="radio"/> Emgality <input type="radio"/> Vitamin B2 (riboflavin) <input type="radio"/> Butterbur (Petadolex) <input type="radio"/> Periactin (cyproheptadine)	<input type="radio"/> Risperdal <input type="radio"/> Zyprexa <input type="radio"/> Buspar (buspirone) <input type="radio"/> Valium (diazepam) <input type="radio"/> Trigger point injections <input type="radio"/> Aimovig (erenumab) <input type="radio"/> NSAIDs <input type="radio"/> Feverfew <input type="radio"/> Namenda (memantine) <input type="radio"/> Nurtec

## Acute Treatments

Mark any acute treatment medications that you take or have taken to relieve pain once a headache or migraine has started.

<b>Analgesics/ NSAIDs</b>	<input type="radio"/> Advil (ibuprofen)	<input type="radio"/> Indocin	<input type="radio"/> Voltaren (diclofenac)
	<input type="radio"/> Aleve	<input type="radio"/> Motrin (ibuprofen)	<input type="radio"/> Cambia (diclofenac)
	<input type="radio"/> Anaprox (naproxen)	<input type="radio"/> Naprosyn	<input type="radio"/> Sprix nasal spray (ketorolac)
	<input type="radio"/> Cataflam	<input type="radio"/> Toradol (ketorolac)	<input type="radio"/> Aspirin
	<input type="radio"/> Celebrex	<input type="radio"/> Relafen (nabumetone)	<input type="radio"/> Tylenol
	<input type="radio"/> Excedrin	<input type="radio"/> Percocet	<input type="radio"/> Percodan
	<input type="radio"/> Ultram (tramadol)	<input type="radio"/> Ultracet	<input type="radio"/> Codeine
<b>Ergot Alkaloid Derivatives</b>	<input type="radio"/> DHE	<input type="radio"/> Migranal	<input type="radio"/> Cafegot
<b>Triptans</b>	<input type="radio"/> Amerge (naratriptan)	<input type="radio"/> Axert (almotriptan)	<input type="radio"/> Frova (frovatriptan)
	<input type="radio"/> Imitrex (Sumatriptan)	<input type="radio"/> Imitrex nasal spray	<input type="radio"/> Imitex inj.
	<input type="radio"/> Treximet	<input type="radio"/> Maxalt (rizatriptan)	<input type="radio"/> Relpax (eletriptan)
	<input type="radio"/> Zomig (zolmitriptan)	<input type="radio"/> Onzetra	<input type="radio"/> Tosymra
<b>Other</b>	<input type="radio"/> Ubrelvy	<input type="radio"/> Reyvow	<input type="radio"/> Fioricet
	<input type="radio"/> Fioricet w/codeine	<input type="radio"/> Fiorinal Codeine	<input type="radio"/> Demerol (meperidine)
	<input type="radio"/> Dilaudid	<input type="radio"/> Methadone	<input type="radio"/> Morphine
	<input type="radio"/> MS Contin	<input type="radio"/> Stadol/butorphanol	<input type="radio"/> Vicodin
	<input type="radio"/> Hydrocodone	<input type="radio"/> Baclofen	<input type="radio"/> Benadryl
	<input type="radio"/> Compazine	<input type="radio"/> Droperidol	<input type="radio"/> Haldol (haloperidol)
	<input type="radio"/> Phenergan (promethazine)	<input type="radio"/> Reglan (metoclopramide)	<input type="radio"/> Thorazine (chlorpromazine)
	<input type="radio"/> Zofran (ondansetron)	<input type="radio"/> Tigan (trimethobenzamide)	<input type="radio"/> Norflex (orphenadrine)
	<input type="radio"/> Decadron (dexamethasone)	<input type="radio"/> Medrol Dose Pack (methylprednisolone)	<input type="radio"/> Prednisone
	<input type="radio"/> Soma (carisoprodol)	<input type="radio"/> Flexeril (cyclobenzaprine)	<input type="radio"/> Midrin
	<input type="radio"/> Robaxin (methocarbamol)	<input type="radio"/> Zavzpret	<input type="radio"/> Nurtec

**I verify that the above information is true and accurate to the best of my knowledge.**

\_\_\_\_\_  
Signature of Patient or Guardian

\_\_\_\_\_  
DATE