**The Farm: Wellness Club & MedSpa, LLC**

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**ADAM QUESTIONNAIRE**

(Androgen deficiency in the aging male)

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| **QUESTION** | **YES** | **NO** |
| Do you have a decrease in libido (sex drive)? |  |  |
| Do you have a lack of energy? |  |  |
| Do you have a decrease in strength and/or endurance? |  |  |
| Have you lost height? |  |  |
| Have you noticed a decreased “enjoyment of life?” |  |  |
| Are you sad and/or grumpy? |  |  |
| Are your erections less strong? |  |  |
| Have you noticed a recent deterioration in your ability to play sports? |  |  |
| Are you falling asleep after dinner? |  |  |
| Has there been a recent deterioration in your work performance? |  |  |