

Comprehensive Questionnaire



Name	TEL () —	Height cm	Weight kg
	Mobile () —	Blood Type () Rh ()	
Nationality 国籍	Address 〒		
Date of Birth _____ year _____ month _____ day	Age	Occupation 職業	
If you received a number from the English Help Desk via email, please write it down. ()			

- At Oak Clinic, in accordance with the Personal Privacy Act, every patient's personal information is kept confidential and we are working to make sure all patient's privacy is protected.
- Please understand that at times when it is necessary we will call you on the telephone/mobile phone number that you have provided us with.

Please answer the following questions.

1) Have you ever had a check-up at Oak Clinic, Sumiyoshi, Oak Clinic, Namba, Oak Clinic, Umeda, or Oak Clinic, Ginza? (You cannot go to more than one clinic at a time for insured check-ups, because we are the same clinic group.) **【 YES • NO 】**
 オーク会の他のクリニックを受診されたことはありますか？（同一法人の為、保険診療での同時通院が不可です）

2) Please tell us why you are here today. (You may check as many as you like) 本日来院された理由を教えてください。（複数でも結構です）

Want children 子どもがほしい

Want IVF (ICSI • TESE included) 体外受精希望（顕微授精・TESE 含む）

Want general fertility treatment 一般不妊治療希望 **【 Timing Guidance • Artificial Insemination "AIH" 】**
タイミング指導 人工授精

Want predetermined sex selection 産み分け希望 **【 IVF • AIH • Timing • Calcium phosphate • Gel 】**
体外受精 人工授精 タイミング リンカル ゼリー

Want an infertility test 不育症検査希望

Want a repeated implantation failure test 反復着床不全検査希望 **【 IFCE • ERA 】**

Please fill in any other things you want 他にご希望がございましたらご記入ください。()

※If you attended the IVF Seminar 体外受精セミナー受講の方 → I attended the IVF Seminar in _____ (month) of _____ (year).

I want oocyte cryopreservation 卵子凍結希望

_____年_____月に卵子凍結セミナーを受講しました。

※If you attended the Oocyte Cryopreservation Seminar → I attended the Oocyte Cryopreservation Seminar in _____ (month) of _____ (year).

Want an Anti-Mullerian Hormone Test (Ovarian age test) AMH検査（卵巣年齢検査）希望

Want the Fertility Diet ダイエット希望

Gynecology Gynecology is only handled at Oak Clinic Sumiyoshi, Namba, and Umeda locations. 婦人科 婦人科は、住吉、なんば、梅田のみの取り扱いとなります。

Others (Please easily fill it out. 簡単にご記入ください。) ()

3) Regarding your menstruation あなたの月経について

When was your last period? 最も最近の月経はいつですか？

From: _____ year / _____ month / _____ day for _____ days. Menarche 初経: _____ years old • Menopause 閉経: _____ years old

Menstrual Cycle is 月経周期は? : 25 ~ 38 days : (_____) days Shorter than 24 days 24 日より短い

Longer than or equal to 39 days 39 日以上 Longer than or equal to 3 months 3 か月以上

Menstrual Symptoms are 月経時の症状は? : Heavy flow 量がかなり多い Light flow 量がかなり少ない Strong menstrual pains 月経痛が強い

Use of menstrual pain killers 月経時鎮痛剤使用 (name 薬名: _____)

4) Have you ever had sexual intercourse before? 性交の経験はありますか？

【 YES • NO → Can you have a Transvaginal USG (YES • NO • I DON'T KNOW) 】 経膈超音波（できる・できない・わからない）

5) History of allergies アレルギーの既往 **【 YES • NO → If YES, please answer the following 】**

Medicine 薬 Food 食物 Alcohol アルコール Latex rubbers ラテックスゴム Anesthetics 麻酔薬

(Causative substances 原因物質:)

(Symptoms 症状:)

6) Medical History 既往歴

(_____ years old, Illness name: _____, Name of medicine in use: _____, Treatment completed)

7) Surgical History 手術歴 (_____ years old, Illness name: _____, Name of surgery: _____)

8) Family History 家族歴 Is there anyone in your family that has a special disease? 家族の中に何か特別な病気の人がありますか？

【 NO • YES → (genetic disease • diabetes • cancer • other) 】 (遺伝病・糖尿病・がん・その他)

9) Marriage History 結婚歴 Married at age _____ in _____ month of _____ year, and now _____ year _____ month _____ year 歳で結婚し今 **【 living together • living separately 】**
同居 別居

In a relationship 交際中 Divorced • Separated by death 離婚・死別

10) Pregnancy/Birth History 妊娠・分娩歴 (_____) times pregnant 妊娠回数 (_____) times gave birth 出産回数

Are you currently breastfeeding? 授乳中ですか？ **【 YES • NO 】**

Date	Number of Weeks	Weight	Gender	Transvaginal birth	Caesarian Section	Miscarriage	Abortion
_____ year _____ month	_____ weeks	_____ g	male • female				
_____ year _____ month	_____ weeks	_____ g	male • female				
_____ year _____ month	_____ weeks	_____ g	male • female				

We do have an interpretation service available for a fee. If you wish to have an interpreter, please ask the staff.