



Office: (702) 227-3422

5795 Arville St Suite 200 LV, NV. 89118

9414 Del Webb Blvd. Las Vegas, NV. 89134

3150 N. Tenaya Way Suite 320 LV, NV. 89128

4275 S. Burnham Ave. Suite 100 LV NV 89119

500 E. Windmill Lane Suite 140 LV, NV. 89123

38 Water Street Suite 310 Henderson, NV. 89015

2779 W. Horizon Ridge Pkwy Suite 240

Henderson, NV. 89052

Nevada Heart & Vascular Center

VASCULAR / NEUROPATHY WORKSHEET

Patient name: _____

Date Of Birth: _____ Insurance: _____

Physician: _____ Date Of Service : _____

Please answer the following questions:

1. Do you experience pain in your legs/feet when walking? _____ Yes _____ No

If yes, where does it hurt? _____ thighs _____ knees _____ calves _____ feet

2. Is the pain in your legs/feet relieved by rest? _____ Yes _____ No

3. Do cuts in your arms/legs or hands/feet take a long time to heal? _____ Yes _____ No

4. Have you noticed that less hair grows below your knees than above it? _____ Yes _____ No

5. Do you have or have you had ulcers on your feet? _____ Yes
_____ No

6. Have you noticed that your feet feel cold even when the temperature is warm? _____ Yes _____ No

7. Do you suffer from numbness, tingling or burning in your legs or arms? _____ Yes
_____ No

If yes, where? _____ arms _____ hands _____ buttocks _____ legs _____ feet

Office Use Only

Provider answer key:

1. Pain that increased when exercising m/p PAD – suggest LEA/LEV
2. Hips, Knees – Osteoarthritis Calves – LEA/LEV Feet – NCS/LEA/LEV
3. LEA/LEV
4. NCS/LEA/LEV
5. NCS/LEA/LEV
6. LEA/LEV
7. NCS