Preparing for your appointment: My Headache History



NAME: ˌ	DOB:

Please record below any previous medications you have tried for your headaches. Take this form to your appointment with your doctor. This will help your doctor decide what the best treatment will be for you. Please also note any investigations done for your headaches on page 2. If you have CT and MRI scans, bring them to your appointment. Also bring a headache diary to your appointment. (Download at: www.anzhs.org)

Preventative Medications

Preventative medications are taken every day, to prevent a headache starting.

Medication	Max Dose	Duration	Effective?	Side Effects?

 $Max\ dose = highest\ daily\ dose\ of\ medication,\ duration = how\ long\ the\ medication\ was\ taken\ for,\ Effetive = any\ improvement\ in\ headache\ whilst\ on\ the\ medication,\ Side\ effects = any\ unwanted\ effects\ from\ the\ medication$

Acute Medications

Acute or relieving medications are medications you take when you have a headache, to stop it / reduce the symptoms.

Medication	Max Dose	Effective?	Side Effects?	
ther treatm	ents for heada	che (e.g. physi	o, massage, ad	cupuncture)?
/hat investig	ations have be	een done for ye	our headaches	?
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