

What Symptoms do you have?

[Nose]

- You have a running nose. 鼻水
(Clear or not)
(Watery or not)
- You have a stuffy nose. 鼻づまり
(One or both)
- You sneeze くしゃみ
(Three times or more)

[Throat]

- You have a sore throat. のどの痛み
- You have a cough. 咳
(All days or only _____)
(Dry cough or Wet cough)

[Temperature]

- You have a fever.
- What's your temperature?
(_____ °C)

[Head]

- You have a headache.
(throbbing スキズキ sharp ガンガン)
- What area of your head hurts ?
(front back side or entire)
- You have bumped head.

[Stomach]

- You have a stomachache.
- You feel nauseous. 吐き気
- You have no appetite. 食欲×
- You have diarrhea. 下痢

[Dermatitis]

- You have athlete's foot. 水虫
(itching 痒い oozing ジュクジュク)
- You have eczema. 湿疹

[The others]

- You feel chilly. 寒気
- You have joint pain. 関節痛

- You have itchy eyes. 痒み
(Pain 痛み Mucous Discharge 目ヤニ)
(Something Stuck in the eye ゴロゴロ)
- You have a toothache 歯の痛み

[Memo]

- Your age _____.
- Which problem are you most concerned about?
_____.
- Which do you prefer,
 capsule, tablet powder or syrup?
 ointment. 軟膏 or liquid? 液剤
- How long have you been like that?
(_____ days now)
- Are you currently breastfeeding? (female) 授乳
 Yes or No.
- What illnesses have you had in the past? 既往歴
_____.
- Are you presently taking medication? 飲んでる薬
 Yes or No.
_____.
- Have you ever been allergic to medication or food?
 Yes or No.
_____.
- This is medicine for _____.
- This medicine should be taken _____ time(s) a day
 before meals after meals between meals.
Take _____ tablet(s) at one time.

☆ Take care of yourself.