BEFORE THE CONSULTATION

WELCOME TO TOYOS CLINIC HAIR RESTORATION

GENERAL INFO
Date:_____
Name:_____
Age:_____
Email:_____
Phone Number:_____
Referral:_____

History of Hair Loss
Date of Onset:_____
Type of progression: Acute/chronic/chronic progressive/intermittent

Type of Complaint
Hair density_____
Hair quality_____
Hair structure_____
Visibility of scalp___
Shedding_____
Breakage_____
Other:_____

Previous lab results_____

CBC, Fe, ferritin, vit D, Hg, B12, TSH, T3, T4, prolactin, estrogen, DHEA, ANA, cortisol, insulin, fibrinogen, zinc, selenium, copper, magnesium, B3, B6, Folic acid

Areas of concern:
Frontal
Midscalp
Part
Crown
Sides
Back
Entire Scalp

Previous Treatments
Rogaine (Minoxidil)2%
Rogaine (Minoxidil)5%
Spironolactone
Propecia/Finasteride topical/oral
PRP
Laser light therapy
Hair restoration if so, please list dates and number of grafts

Birth control pills?_____
Other:_____

MEDICAL HISTORY (CIRCLE IF POSITIVE)
Addison's
Celiac
Chronic diseases
Graves
Hashimoto's
Hyperthyroidism
Hypothyroidism
Multiple sclerosis
Myesthenia gravis
Polycystic ovary
Rheumatoid arthritis
Sjogren's
Skin diseases
Systemic lupus
Type 1 diabetes
Menstrual cycles are regular/irregular
Past pregnancies
COVID
COVID vaccine
Surgical procedures including cosmetic

_____
Allergies_____
Current medications_____

FAMILY HISTORY OF HAIR LOSS
Female hair loss
Male hair loss
Telogen effluvium
Lowered hairline

HAIR CARE HABITS
Type of shampoo_____
Frequency of washing_____
Frequency of brushing_____

Do you use
Hair care products _____
Hair styling products_____
Hair coloring agents_____
Hair curling/straightening or braiding_____

If so, how often?_____

LIVING HABITS
Recent stressful life event?
UV exposure
Cigarette smoking
Alcohol abuse
Drug abuse
Crash diet
Weight loss
Weight gain

PSYCHOLOGICAL IMPACT

Do others notice your hair loss?
Does your hair loss influence your daily life?
Are you familiar with treatments for hair loss?
Is there a specific treatment you are interested in?
        Medical treatment?
        PRP?
        Laser light therapy?
        Surgical therapy?