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|  |

**DAILY DIARY H-**

1. Name: -----------------------------------------------------------------------------------------------

**----------------------------------------------------------------------------------------------------------------**

1. Age: -----------------------------------------------------------------------------------------------------

3) Sex:------------------------------------------------------------------------------------------------------

4) Occupation:----------------------------------------------------------------------------------

5) Education:--------------------------------------------------------------------------------------------

6)MaritalStatus:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7) Address:---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

8) Phone number:-------------------------------------------------------------------------------------------------------------------------------

9) Registered in Haemophilia Society:--------------------------------------------------------------------------------------

10) Blood Group: --------------------------------------------------------------------------------------------------------------------------- 11) Family Income:-----------------------------------------------------------------------------------------------------------------------------

Date:

1. Daily activity in school , home, work place etc.
2. any special incidence taken at above said places with mtpact over the patient:
3. Any episode of joint bleed:

date : from:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Duration of sufferings:
2. How did he receive the injury:
3. What measures have been taken:
4. Response after homoeopathic medicine including hammamelis:
5. Behaviour during pain:
6. Joint circumference:
   1. Before medicine:
   2. After medicine:
7. Bleeding: site of bleeding:
8. Nature of bleeding: active (free, profuse) or passive(oozing)
9. What measures have been taken :

11. Response after the administration of the medicine in relation to conventional drugs :

12.factor required? Yes no

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ factor required costing \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
|  | Total number in last month | Healing time | Duration of suffering |
| bleeding episodes |  |  |  |
| joint bleed |  |  |  |