

IRRITABLE BOWEL SYNDROME SCREENING CHECKLIST

Does your patient experience the following?	No	Yes	If yes, how bothersome is this symptom?			
			Not at all	Somewhat	Quite	Extremely
ABDOMINAL SYMPTOMS						
Abdominal pain						
Bloating						
Cramping						
BOWEL MOVEMENTS						
Loose/water stools, types 6 or 7 (>25% of bowel movements)						
Hard/lumpy stools, types 1 or 2 (>25% of bowel movements)						
Increased frequency of bowel movements						
Decreased frequency of bowel movements						
Straining						
Urgency						
ADDITIONAL SYMPTOMS						
Nausea						
Flatulence						
Migraine						
Anxiety or depression						
ALARM FEATURES						
Unexplained weight loss						
Blood in stool						
Family history of inflammatory bowel disease, celiac disease, or colon cancer						
Anemia						
Abdominal mass or evidence of defecatory disorder						
OTHER CONSIDERATIONS						
Experiencing symptoms for ≥3 months						
Symptom onset ≥6 months ago						
NOTES						

