

Chapter 23 *Personal Inventory*

Family Health History

Use this chart to begin a family health history of chronic diseases and disabilities. In the columns headed Family Member, write the name of any close relative who has or had the disease or disability. (Close relatives include your parents, grandparents, brothers, sisters, uncles, aunts, and the brothers and sisters of your grandparents.) Good sources for this kind of information include family records or a knowledgeable older relative.

Fill in the chart below. Continue the chart on another sheet of paper, if necessary.

Condition	Family Member	Condition	Family Member
Alcoholism		Hypertension	
Allergies		Impaired mobility	
Arrhythmia		Inherited disorder	
Asthma		Mental disability	
Cancer Type:			
Congestive heart failure		Obesity	
Diabetes, type 1		Osteoarthritis	
Diabetes, type 2		Osteoporosis	
Emphysema		Rheumatoid arthritis	
Epilepsy		Sickle-cell disease	
Hearing impairment		Stroke	
Heart attack		Visual impairment	

What did you learn about your family history that you did not know before?

What can you do to decrease the risk for each condition that appears in your family health history?
