

## Medical & Lifestyle Questions

I like to work from the head down just to better understand all that is going on.

Have you **ever** been diagnosed with and or treated for:

**Anxiety? - Depression? - Bi-polar? - Schizophrenia,**  
**Any Other** Mental Health Disorder?

Now to the **heart**, have you **ever** been diagnosed or treated for anything like:

**High Blood Pressure?**

**High Cholesterol?**

**Irregular Heartbeat?**

**Leaky Valves?**

Heart **Murmur?**

**Peripheral Vascular or Peripheral Artery Disease?**

Had a **Heart Attack?**

ANY type of **Heart Surgery?**

Have you **ever** been diagnosed with **anything?**

Treated for any sort of **Heart Disease or Disorder?**

Now your **lungs**, **ever** been diagnosed with or treated for:

**Asthma? - Bronchitis? - COPD?**

**Emphysema,** or any lung or respiratory disease or disorder

## Medical & Lifestyle Questions

Other important organs, **ever** been diagnosed or treated for any disease or disorder with your:

**Kidneys - Liver - Bladder - Intestines - Blood**

**Ever** been treated for any type of **circulatory** issues?

Have you **ever** had any **surgeries**?

Have you been to the **hospital** for ANYTHING in the last **15yrs**?

Have you have had **cancer**? More than once? Same or Different?

Have you **ever** had a **stroke** or a **mini stroke**?

Have you been diagnosed with **sleep apnea**?

Have you been diagnosed with **epilepsy** or ever had any **seizures**?

Have you **ever** been diagnosed with **diabetes**?

Any complications?

How are you controlling it?

What was your last A1C?

When were you diagnosed?

Have you **EVER** used **insulin**?

Have you **ever** been diagnosed or treated for **ANY other disease or disorder** that I haven't asked yet?

## Medical & Lifestyle Questions

What does your **driving record** look like?

Have you **ever** had **any DUI's**

In the last 5 years had **3 or more moving violations?**

Have you **ever** had a **felony?**

Have you taken any **illegal drugs** in the last 5yrs?

Do you take any **pain pills?**

Do you have any **dependency on any medicine** a doctor has prescribed?

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Any **hazardous activities or vocation?**

Hang-gliding, Skydiving, Racing (boats, cars, trucks, motorcycles), scuba diving, ballooning, ultralight flying, mountain or rock climbing, flying (pilot or student)

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Have you **ever applied for life insurance** before?

- If so did they do any **exams** or take any blood or fluid?
- Have you **ever** got **declined** or **rated?**
- What were the results of the exam and blood/fluids?
- Did you end up being told it would cost more than you were originally quoted?  
(meaning they were probably rated)