

Dr. Herbst's Questionnaire for Patients

Please choose any of the following connective tissue conditions or associated conditions that you are seeking care for:

Lipedema

Who initially diagnosed you with your condition?

Dr. Joseph Hagman, vascular surgeon

How did you hear or learn about Dr. Herbst?

a. Total Lipedema Care website

c. YouTube

d. Instagram

When did your condition start or when do you think it started?

a. Puberty

Have you ever noticed your legs were larger than the rest of your body or larger than people of your same age? At what age?

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Is your tissue painful?

Yes

If yes, at what age and/or after what event did the pain start?

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Which areas of the body are you experiencing pain?

a. Upper arms

b. Lower arms

c. Breasts

d. Abdomen

e. Upper back

g. Front of thighs

h. Back of thighs

i. Inner thighs

j. Front of calves

k. Back of calves

l. Inner calves

m. Ankles

Are there areas of your body that are tender to the touch? If yes, where?

a. Upper arms

b. Lower arms

c. Breasts

d. Abdomen

e. Upper back

g. Front of thighs

h. Back of thighs

i. Inner thighs

j. Front of calves

k. Back of calves

	l. Inner calves	m. Ankles
On a comparative pain scale of 1-10 (10 being the most painful), what pain level are you experiencing on a daily basis?	6 / 10	
What pain level do you experience on a bad day?	7 / 10	
What pain level do you experience on a good day?	5 / 10	
Do you experience swelling?	Yes	
If yes, where on the body do you experience swelling?	a. Upper arms d. Abdomen g. Front of thighs h. Back of thighs i. Inner thighs j. Front of calves k. Back of calves l. Inner calves m. Ankles	
Do you swell more standing for long periods of time?	Yes	
How long (minutes) can you stand without swelling, pain or other issues?	f. 41-60 minutes	
Do you swell sitting for long periods of time?	Yes	
How long can you sit without swelling, pain or other issues?	f. 41-60 minutes	
Do you swell or does your swelling worsen in the heat?	No	
Do you elevate your legs to make them feel better?	No	
Does any swelling you have resolve with elevation or sleeping overnight?	Yes	
Are there any areas of your body that you don't lose fat tissue from by diet or exercise? (choose all that apply)	a. Upper arms d. Abdomen h. Abdomen i. Front of thighs j. Back of thighs k. Inner thighs l. Front of calves m. Back of calves n. Inner calves o. Ankles	

Have you been able to lose weight on an eating plan?

Yes

Have any of the following medications or supplements been helpful for your signs and symptoms? (Choose any that apply)

Phentermine	Not helpful
Dextroamphetamine/Adderall	
Diosmin, MPFF or Vasculera	
Ozempic, Wegovy or other	
GLP-1 agonist	
Metformin	

What eating plans have you tried that improved your symptoms, including swelling and pain?

Ketogenic

Anti-inflammatory

Low carbohydrate

What activities are you unable to perform?

Walking, restorative yoga, water aerobics, Essentrics (mobility strengthening exercise program)

What exercise do you do?

Walking

Yoga

Water aerobics, Essentrics

Do you experience extreme fatigue defined as a lingering tiredness that is constant and limiting; in other words, unexplained, persistent, and relapsing exhaustion.

Yes

Do you have brain fog?

Yes

Choose all parts of your body where you have heavy tissue:

Upper arms

Abdomen

Front of thighs

Back of thighs

Inner thighs

Front of calves

Back of calves

Inner calves

Ankles

As a child did you amuse your friends by contorting your body into strange shapes OR could you do the splits?

No

Can you now (or could you ever) bend your thumb to touch your forearm?

No

Can you now (or could you ever) place your hands flat on the floor without bending your knees?

No

As a child or teenager did your shoulder or kneecap dislocate on more than one occasion?	Yes
Do you consider yourself double-jointed?	No
Do you wear compression garments?	Yes
How long have you worn compression?	> 6 months – one year
What are the benefits of wearing your compression garments?	Reduction in swelling Reduction in pain
Have you tried the following manual therapy: manual lymphatic drainage (MLD) therapy as part of complete decongestive therapy?	Yes
If you tried MLD, did it improve your symptoms?	Yes
Have you tried the following manual therapy: Deep tissue therapy such as myofascial release, Rolfing, Swedish massage, Thai massage, etc.	Yes
If you tried deep tissue therapy, did it improve your symptoms?	No
Do you have an intermittent pneumatic compression (IPC) pump?	Yes
If you have an IPC pump how often do you use it?	Once a day
Which of the following therapies have you tried and received benefit for your symptoms (Choose all that apply):	Infrared sauna Acupuncture Cupping Foam rollers, gua sha tools, other rollers or tools
Does your physical health interfere with your social activities?	Yes
What do you do for work?	Manager, Supply Chain Business Systems
Does your physical health interfere with your work?	Yes
Do you bruise easily?	Yes

How often do you find bruises on your body?	Weekly			
Do you have spider veins?	Yes			
Do you have varicose veins?	Yes			
Do you have venous insufficiency?	Yes			
Have you ever had a vein procedure such as injection of detergent or radio frequency ablation or stripping to close one of your veins?	Yes			
If your veins were ever treated, did your symptoms improve?	No			
Have you ever experienced a blood clot or have been diagnosed with deep vein thrombosis (DVT)/pulmonary embolus?	No			
Do you feel hard nodules, lumps, or "grains" under the skin in areas with affected tissue?	Yes			
What areas of your body have nodules, lumps or grains?	Upper arms	Lower arms	Breasts	Abdomen
	Upper back	Front of thighs	Back of thighs	
	Inner thighs	Front of calves	Back of calves	
	Inner calves	Ankles		
Rate your overall health?	Fair			
What was your highest weight in pounds?	226			
What was your lowest weight in pounds?	123			
Have you participated in a supervised weight loss program such as a bariatric surgery program, a weight loss clinic, a supervised dietary program, a nutritionist supervised program, a personal trainer or other?	Yes			

If you participated in a supervised weight loss program, did your affected tissue reduce or did your symptoms improve?

No

If you have previously had any surgical procedures for your condition, did your symptoms improve after the surgery?

No

Is there any additional information you would like for us to know so we can better care for you?

Diagnosed with Raynaud Syndrome, right patella tracking issue, right foot out toeing, left foot swells & diagnosed tarsal coalition, significant increase in cherry angiomas, cognitive issues, suspect ADD, extreme fatigue with low ferritin