

Survey for Workshop on -

**"THE PHENOMENON OF AGEING, RELATED DISORDERS AND SMART AGEING"**

(Malda, West Bengal)

Date : July 6<sup>th</sup>, 2019 – July 7<sup>th</sup>, 2019

Name of the Student:

Name of the School:

Name of Area Surveyed:

Details of the Subject/ Patient –

Age:

Sex:

Family Organization (Joint / Nuclear):

Disease name:

Disease Type (Neurological/Cardiovascular/Metabolic/Reproductive/Others) with details in brief:

Age of onset of disease:

Treatment - Taken /Not taken

If taken

Treatment type:

Condition after treatment:

Duration of treatment:

Whether the patient was kept in isolation / rehab centre :

Any member suffering from age related disorder in the family:

If yes, the details -

Any instance of age related disorder in family history: Yes / No

If yes, then Type of disorder:

Total number of people above 50 years in the family -

Number of people above 50 years-

- a) With genetic disorders in the family-
- b) With health related issues-

Detail of the genetic disorder or health related issues for people above 50 years -

Signature of the student(s)

Collected this information