

PATIENT REGISTRATION FORM

Chart #: _____ Location: _____ Today's Date _____

Name _____ Male Female

First Initial Last

Date of Birth _____ Age _____ Marital Status S M W D X

Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

E-mail _____

Preferred method of communication for reminder calls: ___ Calls ___ Texts ___ E-mails

Patient's Social Security # _____ Driver's License # _____

Patient's Employer & Address _____

Patient's Occupation _____ Primary Care M.D. _____

May we contact your Primary Care M.D. for Coordination of Care? ___ Yes ___ No

Person to notify, if necessary _____

Address _____ Phone _____ Relationship _____

Legal Competency Status: [] Minor [] Competent [] Incompetent (Need legal documentation of adjudication.)

Name of Guardian, if applicable: _____

Referred By: _____

Which Pharmacy do you use? _____ Phone # _____

List any prescription drug allergies _____

Do you have prescription insurance coverage? Yes No

Patient Signature (guardian if underage 18):

THE FOLLOWING INFORMATION MUST BE COMPLETED

GUARANTOR INFORMATION (person responsible for this account)

Name _____ Relationship _____ Date of Birth _____

Mailing Address _____

Social Security # _____ Employer _____

Minor Patients Only: I, as responsible party for this patient, have received a copy of the Policy on Attendance. Please initial _____

Family History:

Please circle on list below all that apply:

Alcoholism	Dementia	Learning disability
Alzheimers	Diabetes Mellitus	Mental retardation
Anemia	Depression	Schizophrenia
Anxiety disorder	Down's syndrome	Stroke
ADD	Endocrine disease	Substance Abuse
Autism	Enuresis	Suicidal attempts
Bipolar disorder	Headaches	Thyroid disease
Cardiac Arrhythmia	High cholesterol/lipids	Ulcerative colitis
Cardiac disease	Jail or Prison	

Past Medical History

Please check all that apply to you:

Cancer: Type _____

Cardiovascular

- Hypertension
- CHF
- Mitral Valve Prolapse
- Peripheral vascular disease
- Arrhythmia

Dermatology

- Herpes
- Lupus
- Melanoma
- Shingles
- Skin cancer
- Ulcers

Endocrine

- Diabetes
- Hypothyroid
- Hyperthyroid
- Goiter

Gastrointestinal

- Cirrhosis
- Colitis
- Gastritis
- Hepatitis
- Ulcer

Female GU

- Abnormal pap
- Birth control pills
- Cancer
- Dysmenorrhea
- Infertility
- Postpartum depression
- Pregnancy

Male GU

- BPH
- Erectile dysfunction
- Prostate problems

Renal

- Dialysis
- Incontinence
- CRF
- UTI

HEENT

- Cataract
- Glaucoma
- Visual Loss

Hematologic

- Anemia
- Low iron
- Hodgkin's disease

Immunological

- Chemotherapy
- HIV
- AIDS
- Lupus
- TB

Musculoskeletal

- Arthritis
- Disc disease
- Osteoarthritis
- Scoliosis

Neurology

- Alzheimer's disease
- Headache
- Migraine
- MS
- Stroke
- Seizures
- Tumor

Psychiatric

- Bipolar
- Depression
- Dementia
- MR
- Schizophrenia

Respiratory

- Asthma
- COPD
- TB

Surgeries

Please circle all that apply and year surgery was done:

Surgery	Year	Surgery	Year
Bariatric Surgery		Lung Cancer	
Brain Cancer		Lumbosacral Surgery	
Breast Cancer		Ovarian Surgery	
CABG		Parathyroid tumor	
Cerebral Aneurysm		Pituitary tumor	
Cervical Cancer		Prostate cancer	
Colon Cancer		Rectal cancer	
Diverticulitis		Scoliosis surgery	
Gastric ulcer		Skin cancer	
Gallbladder		Subdural hematoma	
Glaucoma		Thyroid surgery	
Hernia Repair		Ulcerative Colitis	
Hysterectomy		Valvular heart disease	
Kidney Transplant			

Review of Systems

Please check all that are occurring today.

Allergic Conditions

- Food Allergies
- Hay Fever
- Medication Allergies

Cancer

- Breast
- Cervical
- Colon
- Lung
- Prostate
- Radiation Therapy
- Uterus

Cardiovascular

- Arrythmia/Palpitation
- Blood clots/Phlebitis
- Edema/Swelling
- Fainting/Dizziness
- Heart Attack/Chest pain/Cardiac Cath
- Hemophilia
- High blood pressure
- High cholesterol
- Sickle Cell Disease (not trait)

Communicable Disease

- Aids/HIV
- Blood transfusions

Eyes

- Blindness
- Eye problems
- Glaucoma

Gastrointestinal

- Cirrhosis liver
- Colon/Rectal polyps
- Hiatal Hernia reflux
- Loss of appetite
- Nausea/vomiting
- Pancreatitis
- Rectal bleed
- Ulcerative colitis
- Ulcers/stomach pain
- Diarrhea

Genitourinary

- Abnormal mammogram
- Abnormal pap
- Blood in urine
- Breast lumps/cysts
- Incontinence
- Kidney or urinary problems
- Menopause
- Menstrual irregularity
- Pain during period/intercourse
- Premenstrual Syndrome

Neurological

- Balance disorder
- Dizziness
- Headaches
- Loss of consciousness
- Multiple sclerosis
- Neuropathy/numbness/tingling
- Paralysis/weakness of limb
- Seizure other than assoc w/high fever
- Seizures/convulsions
- Severe speech/language problems
- Spinal cord injury
- Stroke
- Tics
- Tremor

Respiratory

- Asthma
- Asthma requiring frequent hospitalization
- COPD
- Emphysema
- Pneumonia
- Shortness of breath

- Hepatitis
- Herpes
- Sexually transmitted disease
- Syphilis
- Tuberculosis, positive skin test

Constitutional Symptoms

- fever, headache, nausea, dizziness
- Anorexia
- Insomnia
- Sedation

Ears, Nose, Mouth, Throat

- Deafness
- Dental Problems
- Ear infections
- Speech problems

Endocrine

- Adrenal
- Diabetes
- Osteoporosis
- Pituitary disorders
- Significant birth defect(s)/physical/congenital
- Thyroid disorders
- Weight changes

- Prostrate enlargement
- Sexual problems
- Vaginal symptoms

- Sleep Apnea
- Snoring

Hematologic/Lymphatic

- Anemia
- B12 Deficiency
- Easy bruising
- Hemophilia
- Iron Deficiency
- Sickle Cell

Integumentary

- Eczema
- Acne
- Change in mole
- Psoriasis
- Sore that won't heal, recurrent sores

Musculoskeletal

- Acute Pain
- Chronic Pain
- Osteoporosis