ERSONAL MEDICA	AL HISTORY:					
re you pregnant?	☐ Yes	□ No	☐ Possibly			
	(Ple	ase check previous	or current medical con	ditions)		
l None 🛮 Anemia	э	☐ Arthritis	☐ Asthma	☐ Blood Clots/DVT	☐ Cancer	□ COPD
☐ Depres	sion	□ Diabetes	☐ Gout	☐ Heart Disease/CA	D	□ HIV
☐ High Bl	ood Pressure	☐ High Cholester	ol 🛮 Irregular Hearth	oeat 🛘 Liver Disease	☐ Lung Disease	☐ Osteoporosis
☐ Prostat	:e	☐ Psoriasis	☐ Stomach Ulcer/	Reflux □ Stroke	☐ Seizures	☐ Thyroid Disease
☐ Vascular Disease		☐ Dental infection	ons or other Unresolved	Dental Issues	☐ Other:	
ave you ever had	or been treated	l for MRSA (Methic	illin-resistant Staphylo	coccus Aurous) or STAPH ii	nfection? No	☐ Yes :Date Cleared
o you have a hist	ory of Post-Ope	rative infections?	□ No □ Yes, expla	in		
JRGICAL HISTORY	: (Please list pro	evious surgeries an	d dates) 🗆 NONE _			
IDDENT MEDICA	TIONS: /Please I	ist the names of an	v procesintion modicati	one which you are precent	u taking /or provide a list	
IRRENT WEDICA	IIONS: (Please I	ist the names of an	y prescription medicati	ons which you are presentl	y taking/or provide a list	.)
EDICATION ALLE	RGIES:	□ None I	☐ Yes, name of drug an	d reaction:		
NY METAL ALLER	GIES:	□ None I	☐ Yes, what metal?			
NY NICKEL ALLER	GY:	□ No I	☐ Yes, reaction?			
				vorced		
	Marital Status:	☐ Single I	☐ Married ☐ Di			
NY NICKEL ALLER(Marital Status:	□ Single I	☐ Married ☐ Di	vorced		
	Marital Status: Hobbies: Smoking Histor	☐ Single I	☐ Married ☐ Di	vorced		
OCIAL HISTORY:	Marital Status: Hobbies: Smoking History	□ Single I	□ Married □ Di	vorced	packs/day forye	ars
OCIAL HISTORY:	Marital Status: Hobbies: Smoking History	□ Single I	□ Married □ Di	vorced	packs/day forye ma □ Blood Clots/DV	ars
OCIAL HISTORY: MILY HISTORY:	Marital Status: Hobbies: Smoking Histor Alcohol History (Only for parent	Single I Ty: Never Smoke Never Ra S/offspring & sibling	Married Di	vorced	packs/day forye ma □ Blood Clots/DV	ars T
OCIAL HISTORY: MILY HISTORY:	Marital Status: Hobbies: Smoking History Alcohol History (Only for parent COPD ood Pressure	Single I Ty: Never Smoke Never Ra S/offspring & sibling	Married Di	vorced	packs/day forye ma	ars T patitis
OCIAL HISTORY: MILY HISTORY: Cancer	Marital Status: Hobbies: Smoking History Alcohol History (Only for parent COPD ood Pressure	Single I Ty: □ Never Smoke T: □ Never □ Ra S/offspring & sibling □ Depression □ High Cholester	Married Di d Former Smoker are Social Daily gs) None Ane Diabetes fol Irregular Hearth Psoriasis	worced Widowed Widowed	packs/day forye ma	ars T Datitis □ HIV □ Metal Allergy
MILY HISTORY: Cancer High Bl Osteop Thyroic	Marital Status: Hobbies: Smoking History Alcohol History (Only for parent COPD ood Pressure porosis d Disease	Single I Ty: Never Smoke Never Ra S/offspring & sibling Depression High Cholester Prostate Vascular Disea k any of the followi	Married Di d Former Smoker are Social Daily gs) None Ane Diabetes rol Irregular Hearth Psoriasis se Other: ng issues which you are	worced Widowed Widowed Current Smoker, Mia Arthritis Asthematical	packs/day forye ma	ars T Datitis □ HIV □ Metal Allergy
MILY HISTORY: Cancer Cancer High Bl Osteop Thyroic VIEW OF SYSTEM Fatigue	Marital Status: Hobbies: Smoking History Alcohol History (Only for parent COPD ood Pressure porosis d Disease	y: Never Smoke y: Never Smoke y: Never Ra s/offspring & sibling Depression High Cholester Prostate Vascular Disea k any of the followi /loss	Married Di Ind Former Smoker Ind Social Daily Ind Diabetes Ind Social Daily Ind Diabetes Ind D	worced Widowed Widowed	packs/day forye ma	ars T □ Metal Allergy □ Seizures
MILY HISTORY: Cancer High Bl Osteop Thyroid VIEW OF SYSTEM Fatigue Vision Changes	Marital Status: Hobbies: Smoking History Alcohol History (Only for parent COPD ood Pressure porosis Disease MS: (Please check	Single I Ty: Never Smoke Never Ra	Married Di d Former Smoker are Social Daily gs) None Ane Diabetes rol Irregular Heartt Prooriasis se Other: ing issues which you are per/Chills	worced Widowed Widowed	packs/day forye ma	ars T Datitis HIV Metal Allergy Seizures
MILY HISTORY: Cancer High Bl Osteop Thyroic VIEW OF SYSTEM Fatigue Vision Changes Chest Pain	Marital Status: Hobbies: Smoking History Alcohol History (Only for parent COPD ood Pressure Horosis Disease MS: (Please check Weight gain	Single I Ty: Never Smoke Never Ra S/offspring & sibling Depression High Cholester Prostate Vascular Disea k any of the followi /loss Fev Single	Married Dialy Ind Former Smoker Ind Social Daily Ind Diabetes Ind Di	worced Widowed Widowed	packs/day forye ma	ars T Datitis HIV Metal Allergy Seizures Anxiety Stress
COLAL HISTORY: CANCER CANCER CHigh BI COSTEOD Thyroid EVIEW OF SYSTEM Fatigue Vision Changes Chest Pain Cough	Marital Status: Hobbies: Smoking History Alcohol History (Only for parent COPD ood Pressure porosis Disease MS: (Please chect Weight gain Hearing Loss Palpitations	Single I Ty: Never Smoke Never Smoke Never Ra Never Ra Note R	Married Di d Former Smoker are Social Daily gs) None Ane Diabetes rol Irregular Hearth Psoriasis se Other: arg issues which you are er/Chills sma eezing	worced Widowed Widowed	packs/day forye ma	ars T Datitis
CIAL HISTORY: Cancer Cancer High Bl Costeop Thyroid VIEW OF SYSTEM Fatigue Vision Changes Chest Pain Cough Nausea/Vomitin	Marital Status: Hobbies: Smoking History Alcohol History (Only for parent COPD Ood Pressure Porosis Disease Weight gain Hearing Loss Palpitations Short of Bre	Single I	Married Di d Former Smoker are Social Daily gs) None Ane Diabetes rol Irregular Hearth Psoriasis se Other: are Street Smoker col Irregular Hearth College Smoker rol Irregular Hearth College Smoker graph Smoker are Smoker college Smoker colleg	worced Widowed Widowed	packs/day forye ma	ars T Datitis
CIAL HISTORY: Cancer Cancer High Bl Costeop Thyroic VIEW OF SYSTEM Fatigue Vision Changes Chest Pain Cough Nausea/Vomitin Difficult Urinatio	Marital Status: Hobbies: Smoking History Alcohol History (Only for parent COPD Ood Pressure Porosis Disease Weight gain Hearing Loss Palpitations Short of Bre	Single I Ty: Never Smoke Never Smoke Never Ra Soffspring & sibling Depression High Cholester Prostate Vascular Disea k any of the followi /loss Fev Single	Married Diabetes Olimbetes	worced Widowed Widowed	packs/day forye ma	ars T Datitis HIV Metal Allergy Seizures Anxiety Stress Diabetes Hot Flashes Easy Bleeding
COLAL HISTORY: Cancer Cancer High Bl Costeop Thyroic VIEW OF SYSTEM Fatigue Vision Changes Chest Pain Cough Nausea/Vomitin Difficult Urinatio	Marital Status: Hobbies: Smoking History Alcohol History (Only for parent	Single I Ty: Never Smoke Never Smoke Never Ra Soffspring & sibling Depression High Cholester Prostate Vascular Disea k any of the followi /loss Fev Single	Married Diadeles Social Daily gs) None Ane Diabetes Fol Irregular Hearth Psoriasis Se Other: Ing issues which you are per/Chills Sema Care deezing G Reflux Inful Urination Sistive Skin	worced Widowed Widowed	packs/day forye ma	ars T Datitis HIV Metal Allergy Seizures Anxiety Stress Diabetes Hot Flashes Easy Bleeding Blood Clots
MILY HISTORY: Cancer High Bl Osteop Thyroid EVIEW OF SYSTEM Fatigue Vision Changes Chest Pain Cough Nausea/Vomitin Difficult Urinatio Rash Headache E INFORMATIO	Marital Status: Hobbies: Smoking History (Only for parent COPD cood Pressure corosis d Disease MS: (Please chect Weight gain Hearing Loss Palpitations Short of Bre g Indigestion In HIV Hives Dizziness N PROVIDED I	Single I	Married Dialy In the diagram of the	worced Widowed Widowed	packs/day forye ma	ars T Datitis
AMILY HISTORY: Cancer High Bl Osteop Thyroid EVIEW OF SYSTEM I Fatigue I Vision Changes I Chest Pain I Cough I Nausea/Vomitin I Difficult Urinatio I Rash I Headache IE INFORMATIO SPONISIBLE FO	Marital Status: Hobbies: Smoking History Alcohol History (Only for parent COPD OOD Pressure Porosis Disease MS: (Please check Weight gain Hearing Loss Palpitations Short of Bree g Indigestion HIV Hives Dizziness PROVIDED IN R UPDATING T	Single I	Married Diabetes Olimbetes	CURRENTLY experiencing) I nsomnia I Sore Throat I Poor Circulation I Stomach Pain I Blood in Urine I Easy Scarring I Tremor I Current Smoker, Astronomia I Easy Scarring I Tremor I Current Smoker, Astronomia I Stomach Pain I Blood in Urine I Easy Scarring I Tremor I Cof MY KNOWLEDGE A	packs/day forye ma	ars T Datitis