Please answer every question, as we are trying to comply with government mandated electronic health records.

Heart
- ❒ Elevated Cholesterol
- ❒ Irregular/Fast Heartbeat

Blood Pressure:
- ❒ High Blood Pressure
- ❒ Low Blood Pressure

Musculoskeletal:
- ❒ Fractures/Broken Bones
- ❒ Joint Replacement

Lungs
- ❒ Asthma/Emphysema

Endocrine:
- ❒ Thyroid Problems

Nervous System
- ❒ Numbness/Tingling

Eyes-Ears-Nose-Throat
- ❒ Jaw Clicking/Popping
- ❒ Jaw Pain

Past Occupational Activities:
- ❒ Administration
- ❒ Business Owner
- ❒ Clerical/Secretarial
- ❒ Computer User
- ❒ Construction
- ❒ Daycare/Childcare
- ❒ Executive/Legal
- ❒ Food Service Industry
- ❒ Healthcare
- ❒ Heavy Equipment Operator
- ❒ Heavy Manual Labor
- ❒ Home Services
- ❒ Household
- ❒ Light Manual Labor
- ❒ Manufacturing
- ❒ Medium Manual Labor
- ❒ Military
- ❒ Police/Fire
- ❒ Professional Services
- ❒ Retail Worker
- ❒ Teacher
- ❒ Truck Driver

Current Occupational Activities:
- ❒ Administration
- ❒ Business Owner
- ❒ Clerical/Secretarial
- ❒ Computer User
- ❒ Construction
- ❒ Daycare/Childcare
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- ❒ Professional Services
- ❒ Retail Worker
- ❒ Teacher
- ❒ Truck Driver

Medical Conditions:
- ❒ Hypertension
- ❒ Hypothyroidism

Surgeries:
- ❒ Appendectomy
- ❒ Cardiovascular Procedure
- ❒ Cervical Disc Procedures
- ❒ Gall Bladder
- ❒ Hernia
- ❒ Hysterectomy
- ❒ Joint Replacement
- ❒ Laminectomies
- ❒ Radical Prostatectomy
- ❒ Rotator Cuff Repair
- ❒ Tonsillectomy
- ❒ Transuretheral Prostate Surgery

Allergies:
- ❒ Allegra
- ❒ Eggs
- ❒ Fish and Shellfish
- ❒ Hayfever
- ❒ Milk or Lactose
- ❒ Peanuts
- ❒ Soy
- ❒ Sulfites
- ❒ Tree Nuts
- ❒ Wheat/Gluten

Please answer <u>every</u> question, as we are trying to comply with government mandated electronic health records.

Social History:

- ❒ patient does not follow a special diet
- ❒ caffeine used often
- ❒ drink 5-8 glasses of water per day
- ❒ drink more than 8 glasses of water per day
- ❒ eat 4 meals per day
- ❒ experience stress occasionally
- ❒ sleep more than 8 hours per night
- ❒ wear seat belts--never
- ❒ patient does not smoke
- ❒ chew tobacco occasionally
- ❒ drink alcohol never
- ❒ eat 1 meal per day
- ❒ exercise not at all
- ❒ experience stress often
- ❒ smoke 1 pack or less per day
- ❒ wear seatbelts--usually
- ❒ caffeine used never
- ❒ chew tobacco often
- ❒ drink alcohol occasionally
- ❒ eat 2 meals per day
- ❒ exercise occasionally
- ❒ sleep 0-4 hours per night
- ❒ smoke more than 1 pack per day
- ❒ caffeine used occasionally
- ❒ drink 0-4 glasses of water per day
- ❒ drink alcohol often
- ❒ eat 3 meals per day
- ❒ exercise often
- ❒ sleep 5-8 hours per night
- ❒ wear seatbelts always

Family History:

- ❒ Migraines (parent)
- ❒ Cancer (parent)
- ❒ Diabetes (parent)
- ❒ Eye Problems (parent)
- ❒ High Blood Pressure (parent)
- ❒ Psychiatric (parent)
- ❒ Thyroid (parent)
- ❒ Migraines (sibling)
- ❒ Cancer (sibling)
- ❒ Diabetes (sibling)
- ❒ Eye Problems (sibling)
- ❒ High Blood Pressure (sibling)
- ❒ Psychiatric (sibling)
- ❒ Thyroid (sibling)
- ❒ Arthritis (parent)
- ❒ Cholesterol (parent)
- ❒ Ear Problems (parent)
- ❒ Heart Problems (parent)
- ❒ Lung Disease (parent)
- ❒ Stroke (parent)
- ❒ Arthritis (sibling)
- ❒ Cholesterol (sibling)
- ❒ Ear Problems (sibling)
- ❒ Heart Problems (sibling)
- ❒ Lung Disease (sibling)
- ❒ Stroke (sibling)

Substance Abuse:

- ❒ Alcohol (past)
- ❒ Barbiturates (past)
- ❒ Crystal Meth
- ❒ Marijuana (present)
- ❒ Alcohol (present)
- ❒ Barbiturates (present)
- ❒ Heroin (past)
- ❒ Amphetamines (past)
- ❒ Cocaine (past)
- ❒ Heroin (present)
- ❒ Amphetamines (present)
- ❒ Cocaine (present)
- ❒ Marijuana (past)

Male Children:

- ❒ under 6 years
- ❒ under 10 years
- ❒ under 19 years

Female Children:

- ❒ under 6 years
- ❒ under 10 years
- ❒ under 19 years

Recreational Activities:

- ❒ Backpacking
- ❒ Gardening
- ❒ Running
- ❒ Swimming
- ❒ Weight Lifting
- ❒ Biking
- ❒ Golf
- ❒ Skiing
- ❒ Tennis
- ❒ Boating
- ❒ Golf
- ❒ Skiing
- ❒ Tennis
- ❒ Football
- ❒ Racketball
- ❒ Soccer
- ❒ Walking

Physician Review:

Signature

Date: