Cell Phone Cel	Medical, Dental Hist	tory Form	Date	Date		
Address State Zip Code Social Security Date of Birth J. Sex; M F Height Weight Single Married Married Single Married Married Phone () Social Security Method Married Phone () Married Phone () Married Phone () Phone ()			Cell Phone	()		
Address State Zip Code	Name	First	Middle	ne ()		
Occupation	Address Number, Street		Business P	hone ()		
Date of Birth						
Name of Spouse						
Email: Referred by						
Referred by MEDICAL HISTORY Are you being treated for a current medical condition Physician name Phone # Address History of Hospitalizations, Surgeries, Major Illnesses Phone # Address History of Hospitalizations, Surgeries, Major Illnesses Phone # Address History of Hospitalizations, Surgeries, Major Illnesses Phone # Address History of Hospitalizations, Surgeries, Major Illnesses Phone # Address History of Hospitalizations, Surgeries, Major Illnesses Phone # Address Heart Attificial joints, Prosthesis: Date Location Phone # Address Artificial joints, Prosthesis: Date Location Phone # Artificial Heart Disease Heart Murmur High Blood Pressure Rineumatic Heart Disease Artificial Heart Disease Artificial Heart Valves Angina Congenital Defect Shortness of Breath Abhormal Bleeding Other Cardiac Shortness of Breath Alteries Altificial Heart Valves Breat Tiberculosis Shortness of Breath Horald Microsoft Previoo Previoo Hepatitis, Liver Disease Kidney Problems Thyroid Problems Respiratory Problems Tuberculosis Immune System Horald Health Issues Joint Palin Bouprofen Codeline, Narcotic Cancer: Date Type Other Allergy Office Use Only Office Use Only Premedicate Women Premedicate Pre				_)		
MEDICAL HISTORY Are you being treated for a current medical condition	Email:	-25 (11)	The second of the second of			
Are you being treated for a current medical condition	Referred by	THE REPORT OF THE PARTY OF THE	man la non			
Physician name	MEDICAL HISTORY					
Address History of Hospitalizations, Surgeries, Major Illnesses Medications	Are you being treated for a cu	urrent medical condition	TO SEATY BYAH 192	AS A FAMILY PRACTICE.		
History of Hospitalizations, Surgeries, Major Illnesses Medications				centro anno se est en manyers		
Artificial joints, Prosthesis: Date				Cataryon eye "malquida int suppo August at our brotone palicy.		
Artificial joints, Prosthesis: Date		AMPA S		te resitar, on spythalected ex-		
Are you or have you taken Fosamax (bisphosphonate) Check all that apply Heart Murmur	Medications		ragionassason awoos an environ an ligitorassason awoos an environ	tati (ton) e militari daren erana i taria etakeliare. Bari (ton) e militari daren erana i taria etakeliare.		
□ Are you or have you taken Fosamax (bisphosphonate) Check all that apply □ Heart Murmur □ High Blood Pressure □ Rheumatic Heart Disease □ Heart Attack □ Pacemaker □ Artificial Heart Valves □ Angina □ Congenital Defect □ Shortness of Breath □ Abnormal Bleeding □ Other Cardiac □ Vertigo □ Asthma □ Diabetes □ Type 1 □ Type 2 □ Seizures □ Fainting □ Stroke □ Vertigo □ Hepatitis, Liver Disease □ Kidney Problems □ Thyroid Problems □ Thyroid Problems □ Respiratory □ Codeine, Narcotic □ Aspirin □ Ibuprofen □ Codeine, Narcotic □ Aspirin □ Ibuprofen □ Codeine, Narcotic □ Codeine, Narcotic □ Cancer: Date □ Type □ Other Allergy □ Other Allergy □ Other Allergy □ Other Allergy □ Other Medical Conditions □ Premedicate □ Premedicate			THE PERSON NAMED OF THE PE	Tarago (Sala man and an Albanto Albant		
□ Are you or have you taken Fosamax (bisphosphonate) Check all that apply □ Heart Murmur □ High Blood Pressure □ Rheumatic Heart Disease □ Heart Attack □ Pacemaker □ Artificial Heart Valves □ Angina □ Congenital Defect □ Shortness of Breath □ Abnormal Bleeding □ Other Cardiac □ Vertigo □ Asthma □ Diabetes □ Type 1 □ Type 2 □ Seizures □ Fainting □ Stroke □ Vertigo □ Hepatitis, Liver Disease □ Kidney Problems □ Thyroid Problems □ Thyroid Problems □ Respiratory □ Codeine, Narcotic □ Aspirin □ Ibuprofen □ Codeine, Narcotic □ Aspirin □ Ibuprofen □ Codeine, Narcotic □ Codeine, Narcotic □ Cancer: Date □ Type □ Other Allergy □ Other Allergy □ Other Allergy □ Other Allergy □ Other Medical Conditions □ Premedicate □ Premedicate						
□ Are you or have you taken Fosamax (bisphosphonate) Check all that apply □ Heart Murmur □ High Blood Pressure □ Rheumatic Heart Disease □ Heart Attack □ Pacemaker □ Artificial Heart Valves □ Angina □ Congenital Defect □ Shortness of Breath □ Abnormal Bleeding □ Other Cardiac □ Vertigo □ Asthma □ Diabetes □ Type 1 □ Type 2 □ Seizures □ Fainting □ Stroke □ Vertigo □ Hepatitis, Liver Disease □ Kidney Problems □ Thyroid Problems □ Thyroid Problems □ Respiratory □ Codeine, Narcotic □ Aspirin □ Ibuprofen □ Codeine, Narcotic □ Aspirin □ Ibuprofen □ Codeine, Narcotic □ Codeine, Narcotic □ Cancer: Date □ Type □ Other Allergy □ Other Allergy □ Other Allergy □ Other Allergy □ Other Medical Conditions □ Premedicate □ Premedicate	□ Artificial joints Prosthosis:	Date	Location	draw Tiper Hong III		
Check all that apply Heart Murmur			Location			
Heart Murmur	☐ Are you or have you taken	Fosamax (bisphosphonate)				
□ Heart Attack □ Pacemaker □ Artificial Heart Valves □ Angina □ Congenital Defect □ Shortness of Breath □ Abnormal Bleeding □ Other Cardiac □ Asthma □ Diabetes □ Type 1 □ Type 2 □ Seizures □ Fainting □ Stroke □ Vertigo □ Hepatitis, Liver Disease □ Kidney Problems □ Thyroid Problems □ Respiratory Problems □ Tuberculosis □ Immune System □ HIV or AIDS □ Glaucoma □ Mental Health Issues □ Joint Pain □ Tetracycline □ Codeine, Narcotic □ Aspirin □ Ibuprofen □ Codeine, Narcotic □ Latex □ Food Allergy □ Other Allergy □ Tobacco Use: □ Smoke □ Oral □ Premedicate Premedicate Premedicate	Check all that apply					
□ Angina □ Congenital Defect □ Shortness of Breath □ Abnormal Bleeding □ Other Cardiac □ Asthma □ Diabetes □ Type 1 □ Type 2 □ Seizures □ Fainting □ Stroke □ Vertigo □ Hepatitis, Liver Disease □ Kidney Problems □ Thyroid Problems □ Thyroid Problems □ Immune System □ HIV or AIDS □ Glaucoma □ Mental Health Issues □ Joint Pain □ Tetracycline □ Amoxicillin □ Tetracycline □ Codeine, Narcotic □ Latex □ Food Allergy □ Other Allergy □ Other Allergy □ Other Allergy □ Other Medical Conditions □ Cancer: Date □ Type □ Other Medical Conditions □ Women	☐ Heart Murmur	☐ High Blood Pressure				
□ Abnormal Bleeding □ Asthma □ Diabetes □ Type 1 □ Type 2 □ Seizures □ Fainting □ Stroke □ Vertigo □ Hepatitis, Liver Disease □ Kidney Problems □ Thyroid Problems □ Respiratory Problems □ Tuberculosis □ Immune System □ HIV or AIDS □ Glaucoma □ Mental Health Issues □ Joint Pain Allergies □ Penicillin □ Amoxicillin □ Tetracycline □ Aspirin □ Ibuprofen □ Codeine, Narcotic □ Latex □ Food Allergy □ Other Allergy □ Office Use Only □ Tobacco Use: □ Smoke □ Oral □ Premedicate Women						
□ Asthma □ Diabetes □ Type 1 □ Type 2 □ Seizures □ Fainting □ Stroke □ Vertigo □ Hepatitis, Liver Disease □ Kidney Problems □ Thyroid Problems □ Respiratory Problems □ Tuberculosis □ Immune System □ HIV or AIDS □ Glaucoma □ Mental Health Issues □ Joint Pain Allergies □ Penicillin □ Amoxicillin □ Tetracycline □ Codeine, Narcotic □ Latex □ Food Allergy □ Other Allergy □ Office Use Only □ Tobacco Use: □ Smoke □ Oral □ Premedicate Women				reath		
□ Diabetes □ Type 1 □ Type 2 □ Seizures □ Fainting □ Stroke □ Vertigo □ Hepatitis, Liver Disease □ Kidney Problems □ Thyroid Problems □ Respiratory Problems □ Tuberculosis □ Immune System □ HIV or AIDS □ Glaucoma □ Mental Health Issues □ Joint Pain Allergies □ Penicillin □ Amoxicillin □ Tetracycline □ Codeine, Narcotic □ Latex □ Food Allergy □ Other Allergy □ Office Use Only □ Tobacco Use: □ Smoke □ Oral □ Premedicate Women		Other Cardiac		And the second s		
□ Seizures □ Fainting □ Stroke □ Vertigo □ Hepatitis, Liver Disease □ Kidney Problems □ Thyroid Problems □ Respiratory Problems □ Tuberculosis □ Immune System □ HIV or AIDS □ Glaucoma □ Mental Health Issues □ Joint Pain Allergies □ Penicillin □ Amoxicillin □ Tetracycline □ Aspirin □ Ibuprofen □ Codeine, Narcotic □ Latex □ Food Allergy □ Other Allergy □ Office Use Only □ Tobacco Use: □ Smoke □ Oral □ Premedicate Women						
□ Hepatitis, Liver Disease □ Respiratory Problems □ Tuberculosis □ Immune System □ HIV or AIDS □ Joint Pain Allergies □ Penicillin □ Aspirin □ Ibuprofen □ Latex □ Food Allergy □ Tobacco Use: □ Smoke □ Cancer: Date □ Other Medical Conditions Women □ Kidney Problems □ Tuberculosis □ Immune System □ Mental Health Issues □ Mental Health Issues □ Other Allergy □ Other Allergy □ Other Allergy □ Premedicate □ Premedicate						
□ Respiratory Problems □ HIV or AIDS □ Glaucoma □ Mental Health Issues □ Joint Pain Allergies □ Penicillin □ Aspirin □ Ibuprofen □ Codeine, Narcotic □ Latex □ Food Allergy □ Other Allergy □ Tobacco Use: □ Cancer: Date □ Type □ Other Medical Conditions □ Tretracycline □ Codeine, Narcotic □ Other Allergy □ Other Allergy □ Premedicate □ Premedicate	☐ Seizures	☐ Fainting ☐ Stroke	☐ Vertigo			
□ HIV or AIDS □ Joint Pain Allergies □ Penicillin □ Aspirin □ Ibuprofen □ Latex □ Food Allergy □ Tobacco Use: □ Cancer: Date □ Cancer: Date □ Other Medical Conditions Women □ Mental Health Issues □ Mental Health Issues □ Mental Health Issues □ Mental Health Issues □ Other Allergy □ Tetracycline □ Codeine, Narcotic □ Other Allergy □ Other Allergy □ Oral □ Premedicate						
Allergies Penicillin						
□ Penicillin □ Amoxicillin □ Tetracycline □ Aspirin □ Ibuprofen □ Codeine, Narcotic □ Latex □ Food Allergy □ Other Allergy □ □ Tobacco Use: □ Smoke □ Oral □ Premedicate □ Cancer: Date □ Type □ Other Medical Conditions □ Oral □ Premedicate		□ Giaucoma	u Mentai Health	issues		
□ Aspirin □ Ibuprofen □ Codeine, Narcotic □ Latex □ Food Allergy □ Other Allergy □ □ Tobacco Use: □ Smoke □ Oral □ Premedicate □ Cancer: Date □ Type □ Other Medical Conditions □ Oral □ Premedicate	Allergies					
□ Aspirin □ Ibuprofen □ Codeine, Narcotic □ Latex □ Food Allergy □ Other Allergy □ □ Tobacco Use: □ Smoke □ Oral □ Premedicate □ Cancer: Date □ Type □ Other Medical Conditions □ Oral □ Premedicate	□ Penicillin	☐ Amoxicillin	☐ Tetracvcline			
□ Tobacco Use: □ Smoke □ Oral □ Premedicate Other Medical Conditions Women	☐ Aspirin			otic		
Other Medical Conditions Women Oral Premedicate Premedicate	□ Latex	☐ Food Allergy				
Other Medical Conditions Women	☐ Tobacco Use:	☐ Smoke	☐ Oral			
Women	□ Cancer: Date	_ Type		☐ Fremedicate		
	Other Medical Conditions					
	Women					
		ng Birth Control Pills		The state of the s		

- OVER -

DENTAL HISTORY				
Chief Dental Concern Any Bad Dental Experi	ionees			
		4145		
Check All That Apply				
☐ Snoring☐ Jaw Pain☐	☐ Sleep Apnea ☐ Morning headaches	□ Cold Sores□ Facial/Head Traum	na	
Are Interested in Cha	inging:			
☐ Your Smile ☐ Shape of Teeth	☐ Tooth Color/Whiteness☐ Position of Teeth	☐ Silver Fillings☐ Spaces Between T	- Feeth	
AS A FAMILY PRA	ACTICE WE HAVE YEAR	S OF EXPERIENCE	AND LOVE TO	TREAT CHILDREN
Payment is due at time o	f treatment unless prior arrangeme	ents have been made.		Physican nema
Balances over ninety day	s are subject to 12% financing cha	arge. '		
	policy, should your account be turn nt to remain in good standing with		rvice, monies incurred	to this practice will be the
	and understand the above. I acknow ion I will not hold my dentist, or an ampletion of this form.			
Signature of Patient:				
P	LEASE VISIT OUR WEBSITE	AT www.NewSmi	lesHappen.co	m vagos teat no vasa to
Medical History Update				
Date	Comments	Andre S	Signature	im link L
		S Dest E	Fagulf Co.	1 (100) (100) (100) (100) (100)
		8484241	go <u>rnación</u>	pamona i
	arties (Blent) idinal/ L		nconie u	A FIV of ALDS