

**SOUTHERN NEW ENGLAND EAR, NOSE, THROAT AND FACIAL PLASTIC SURGERY GROUP, LLP**

**PATIENT HISTORY**

DATE \_\_\_\_\_ CHART NUMBER \_\_\_\_\_

NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ AGE \_\_\_\_\_

**ALLERGIES TO  
MEDICATIONS** \_\_\_\_\_

**PRIOR SERIOUS ILLNESS/MEDICAL CONDITIONS:**

- |          |          |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

**HOSPITALIZATIONS/SURGERY (give date & reason):**

- |          |          |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |

**MEDICATIONS:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

REFERRAL MD \_\_\_\_\_

OCCUPATION \_\_\_\_\_

SOCIAL HISTORY: Marital status: M\_\_ S\_\_ D\_\_ W\_\_

Cigarettes (packs/day) \_\_ Alcohol (drinks/day) \_\_\_\_\_

Recreational Drugs \_\_\_\_\_

**FAMILY HISTORY:** \_\_\_\_\_

**REVIEW OF SYSTEMS (check all):**

**Yes No 1. General**

- \_\_\_ weight loss
- \_\_\_ weakness/fatigue
- \_\_\_ fever/night sweats

**Yes No**

- \_\_\_ jaundice/hepatitis
- \_\_\_ spitting up blood
- \_\_\_ black stools

**Yes No**

- \_\_\_ seizure
- \_\_\_ stroke
- \_\_\_ Bell's palsy

**2. Eyes**

- \_\_\_ dryness/redness
- \_\_\_ blurred/double vision
- \_\_\_ glaucoma

**6. Kidneys & Genitals**

- \_\_\_ pain/burning on urination
- \_\_\_ bloody/cloudy urine
- \_\_\_ penile/vaginal discharge
- \_\_\_ genital rash/ulcers
- \_\_\_ venereal disease
- \_\_\_ kidney stones

**10. Psychiatric**

- \_\_\_ anxiety
- \_\_\_ depression
- \_\_\_ delusions/hallucinations
- \_\_\_ medications

**3. Heart & Circulation**

- \_\_\_ chest pain
- \_\_\_ irregular heartbeats
- \_\_\_ heart murmur
- \_\_\_ leg swelling
- \_\_\_ high blood pressure
- \_\_\_ rheumatic fever

**7. Muscles & Joints**

- \_\_\_ muscle weakness/pain
- \_\_\_ joint pain/swelling
- \_\_\_ arthritis/gout

**11. Hormones**

- \_\_\_ thyroid disorder
- \_\_\_ diabetes ("sugar")
- \_\_\_ irregular menses

**4. Lungs**

- \_\_\_ shortness of breath
- \_\_\_ cough
- \_\_\_ coughing up blood
- \_\_\_ tuberculosis
- \_\_\_ emphysema
- \_\_\_ asthma

**8. Skin & Glands**

- \_\_\_ dryness
- \_\_\_ rash
- \_\_\_ growths/dyscoloration
- \_\_\_ swollen glands

**12. Blood**

- \_\_\_ bleeding tendency
- \_\_\_ easy bruising
- \_\_\_ anemia

**5. Stomach & Intestines**

- \_\_\_ nausea/vomiting/diarrhea
- \_\_\_ heartburn

**9. Neurological**

- \_\_\_ headache
- \_\_\_ numbness/weakness
- \_\_\_ neuralgia
- \_\_\_ off balance/dizziness

**13. Immune System**

- \_\_\_ frequent infections
- \_\_\_ positive HIV test

**14. If Child**

- \_\_\_ immunizations up to date
- \_\_\_ feeding difficulties

The information is to the best of my knowledge accurate and complete. PATIENT SIGNATURE \_\_\_\_\_

Reviewed and updated. PHYSICIAN SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_