

**PAST MEDICAL HISTORY**

Please Circle Yes or No

**FAMILY HISTORY**

	Yes/No	Notes	Relation	Problem	Onset Age	Died of Age
ADD or ADHD						
Allergies						
Anemia			Mother			
Anxiety Disorder						
Arthritis			Father			
Asthma						
Bedwetting			Brother			
Bladder or Kidney Problems						
Blood Diseases			Sister			
COPD						
Chicken Pox			Son			
Congenital Anomalies						
Constipation			Daughter			
Coronary Artery Disease						
Depression			Maternal Grandmother			
Developmental or Behavioral Disorders						
Diabetes			Maternal Grandfather			
Diverticulitis						
Ear or Hearing Problems			Paternal Grandmother			
Eczema, Hives or other skin conditions						
Fibromyalgia			Paternal Grandfather			
GERD/Reflux						
Gout			Maternal Aunt			
Heart Disease						
Heart Problems			Maternal Uncle			
High Cholesterol						
Hospital Admission other than birth			Paternal Aunt			
Hypertension						
Hyperthyroidism			Paternal Uncle			
Hypothyroidism						
Kidney Disease			Unspecified Relation			
Kidney Stones						
Liver Disease						
			<b>SURGICAL HISTORY</b>			
Muscle, Joint, or Bone Problems	Yes/No	Notes	Procedure	Surgery Date	Notes	
Osteoporosis	Yes/No	Notes	#1			
Pulmonary Embolism	Yes/No	Notes	#2			
Seizures/Epilepsy	Yes/No	Notes	#3			
Serious Illness or Injuries	Yes/No	Notes	#4			
Skin Problems	Yes/No	Notes	#5			
Stroke	Yes/No	Notes	#6			
Thyroid Problems	Yes/No	Notes	#7			
Tuberculosis	Yes/No	Notes	#8			
Vision or Eye Problems	Yes/No	Notes	#9			

Additional:

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**SOCIAL HISTORY**



**PEDIATRIC**

Diet	Regular	Sunscreen Used Routinely	Yes No	Smoking Status	Never smoker
	Vegetarian				Former Smoker
	Vegan				Current everyday smoker
	Gluten Free				Current some day smoker
	Specific				Smoker-status unknown
	Carbohydrate				Unknown if ever smoked
Cardiac					

Advanced Directive	Yes No	Smoke alarm in home	Yes No
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Has smoked since age

Smoking-how much	None
	1 PPW
	2 PPW
	1/4 PPD
	1/2 PPD
	1 PPD
	1 1/2 PPD
	2 PPD
	3+ PPD

Alcohol	None
Pre-pregnancy	Occasional
	Moderate
	Heavy

Smoking	None
Pre-pregnancy	1 PPW
	2 PPW
	.25 PPD
	.5 PPD
	1 PPD
	1.5 PPD
	2 PPD
	3 PPD

Illicit Drugs	Yes No
Pre-pregnancy	

Notes: