

Patient Intake Form

Demographic

Full name:

David Smith

Address:

445 William St

City:

West Lafayett

State:

West Lafayette IN.

Phone:

337 555 0131

DoB:

The 30th of September 1985

Emergency Contact

Name:

Jennifer

Phone:

337 555 2141

Relationship:

wife

Medical History

Medications:

false

Health Conditions:

☐ Headaches

☐ Cancer

☐ Heart / Circulation problem

☐ Numbness

☐ Diabetes

☒ High / Low blood pressure

☐ Allergies

☐ Neck / Back injuries

Conditions

Details:

Blood Pressure: I do.It's minor, I do n't even take pills.

Reason of Appointment

I had an accident for couple weeks ago and now I have been feeling some dizziness and strong headaches.