HORIZON FAMILY CLINIC - PATIENT INTAKE FORM

Section A - Patient Demographics

- Full Legal Name: Maria Isabella Thompson

- Date of Birth: 1982-09-12

- Gender: Female

- Address: 412 East Hollow Drive, Madison, WI 53704

Contact Number: (608) 555-9012Internal Patient ID: HFC-2023115

Section B – Insurance Information

Insurance Provider: BlueCare PPOMember ID: BCP-1122334455

- Group ID: BCG-202-MED

- Is Patient Primary Subscriber?: Yes

Section C - Visit Reason & Medical History

- Visit Reason: 6-month chronic care follow-up
- Known Diagnoses:
 - Hypothyroidism (on Levothyroxine)
 - Well-controlled Type 2 Diabetes Mellitus (on Metformin)
 - Mild Hypertension (on Lisinopril)
- Surgical History: None
- Allergies: NKDA (No Known Drug Allergies)
- Family History:
 - Mother Diabetes Type 2
 - Father Hypertension
- Social History:
 - Non-smoker
 - Occasional wine (1-2 times/month)
 - Exercises 3x/week (yoga, walking)