Patient Profile Template

	Student Name:					
Datiant Informs	t!					
Patient Informa	tion					
Patient Initials:			Age:			
Gender:	Health Insurance (coverage, affordability of meds) :		Living Arrangements:			
☐ Male ☐ Female						
	·					
Allergies						
Drugs:			Reaction:			
Environment:			Reaction:			
ADR:			Reaction:			
Medical Informa	ation					
	on for encounter today:					
Onioi Companio (Cast	on one can be a carried as a ca					
History of present illne	SS:					
Past medical history						
Casial History						
Social History						
Tobacco use:	☐ Yes ☐ No	☐ >1 packs per da	□ 0-1 packs per day□ >1 packs per day□ Previous history of smoking			
Alcohol use:	☐ Yes ☐ No	2-6 drinks per w	<2 drinks per week 2-6 drinks per week > 6 drinks per week, history of alcohol dependence			
Caffeine use:	☐ Yes ☐ No	2-6 cups per da	<2 cups per day 2-6 cups per day > 6 drinks per week, history of caffeine dependence			
Other recreational drug	g use: Yes No					

Medication List Medication Reconciliation Completed: ☐ Yes ☐ No			
Current Medication on Herbals)	Indication	Start Date	Response (safety and effectiveness)
Totaling 010 and Horoday			(Salety and Shoomverioss)
ntibiotic use in past 3 months:			

Immunization

Comments:

Review of Systems								
Signs, Symptoms, Lab values	List de	List deviation from normal (and relevant baseline values)					If abnormal, can it be caused by patient's medications?	
Date								
VITAL SIGNS:								
Temp								
ВР								
HR								
RR								
CNS/ NEUROLOGIC								
Confusion								
Drowsiness								
Dizziness								
Fatigue								
Numbness								
Tingling								
EENT								
Voice change								
Swallowing problem								
Taste change								
CVD								
T.cholesterol								
LDL / HDL								
СО								
SOB								
Edema								
Palpitation								
PULMONARY								
SOB								
Wheezing								
Coughing Phlegm/Blood								
Peak Flow								
Peak Flow FLUID & ELECTROLYTE								
FLUID &								
FLUID & ELECTROLYTE								
FLUID & ELECTROLYTE Na ⁺								
FLUID & ELECTROLYTE Na ⁺ K ⁺								
FLUID & ELECTROLYTE Na ⁺ K ⁺ Ca Cl ⁻ HCO ₃								
FLUID & ELECTROLYTE Na ⁺ K ⁺ Ca Cl ⁻								

Signs, Symptoms, Lab values	List deviation from normal (and relevant baseline values)						If abnormal, can it be caused by patient's medications?
Date							
RENAL							
Se. Cr.							
CrCl							
LIVER							
AST							
ALT							
Albumin							
Bruising							
Bleeding							
Ŭ							
GI							
GU/REPRODUCTION							
CO, NEI NODOCHON							
ENDOCRINE							
Se. Glucose							
HgA1C							
TSH							
T4							
MSK							
DERMATOLOGY							
HEMATOLOGY							
Hgb							
Platelets							
WBC							
Neutrophils							
INR							
PTT							
DRUG LEVELS							
Digoxin							
Theophylline							
Lithium							
CULTURES							

Drug Therapy Problems	
Current DTP (provide rationale for selection):	Goals:
Therapeutic Alternatives:	
Recommendation:	Monitoring Plan:
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The year autic Alternatives.	
Therapeutic Alternatives:	
Recommendation:	Monitoring Plan:

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