



# DENTISTREE DENTAL CLINIC

File No:

4766

Name: MARIED

Mobile no.: 0507471708 Email: majid@pashmail.com

Date of Birth: 17-Aug-1981 Sex:  M  F Nationality: SR

How do you know about us?  Family or Friends  Internet  Newspapers  Others

## MEDICAL HISTORY

Certain medical conditions can affect dental treatment and vice versa.

Please complete this form by answering the questions.

Chief Complaint: \_\_\_\_\_

All details will be strictly confidential.

	Yes	No	Others, Please Specify
Are you under a physician's care now?		<input checked="" type="checkbox"/>	
Are you taking any medications, pills, or drugs?	<input checked="" type="checkbox"/>		<u>BP</u>
Have you ever been hospitalized or had a major operation?		<input checked="" type="checkbox"/>	
Have you ever had any complications following dental treatment?		<input checked="" type="checkbox"/>	
Are you a smoker?	<input checked="" type="checkbox"/>		

Do you have, or have you had any of the following

- High Blood Pressure
- Low Blood Pressure
- Rheumatic Fever
- Fainting / Seizures
- Asthma
- Heart Attack
- Epilepsy
- Leukemia
- Heart Disease
- Kidney Disease
- Liver Disease
- Lung Disease
- Thyroid Problem
- Diabetes
- Tuberculosis
- Hepatitis/Jaundice
- Stroke
- Arthritis
- Cancer
- AIDS/HIV Infection
- Creutzfeldt-Jakob disease (CJD)
- Others, Please Specify \_\_\_\_\_

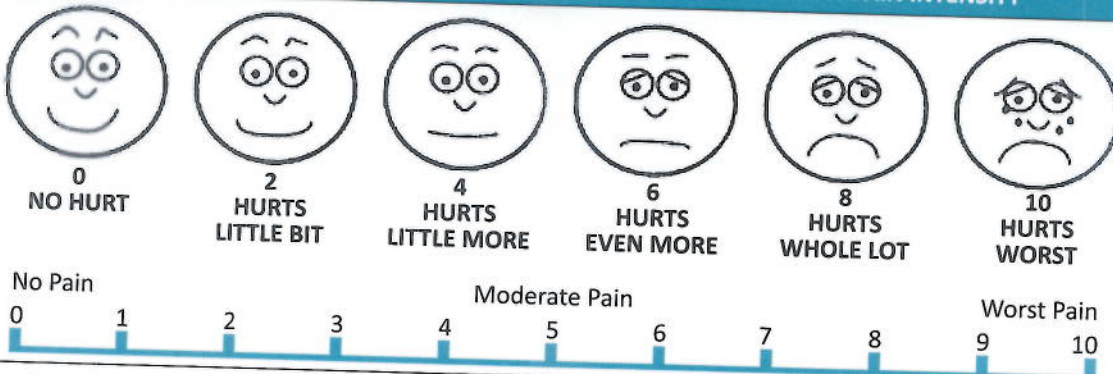
Are you allergic, or have you reacted adversely to any of the following:

	Yes	No	Others, Please Specify
Local anesthetics (Novocaine)			
Penicillin or other antibiotics			
Asperin or Ibuprofen			
Reactions to metals			
Latex or rubber dam			
Foods			

Additional questions for women.

	Yes	No	Others, Please Specify
Are you pregnant or trying to get pregnant?			
if yes, expected delivery date: _____			
Are you taking oral contraceptives?			

PLEASE SELECT THE NUMBER THAT BEST REPRESENTS YOUR CURRENT PAIN INTENSITY



To the best of my knowledge, all of the preceding answer and information provided are true and correct. If I ever have any change in my health, I will inform the doctor at the next appointment without fail.