

Name \_\_\_\_\_ Age \_\_\_\_\_ Clinic Chart No. \_\_\_\_\_

Social History: Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Single \_\_\_\_\_

Family History: Have any of your relatives had cancer, particularly of the breast or colon?  
(Please list relationship and type of cancer or indicate no)

\_\_\_\_\_

If alive, age of father \_\_\_\_\_, mother \_\_\_\_\_, sister(s) \_\_\_\_\_, brother(s) \_\_\_\_\_

If not living, cause of death and age at death: Father \_\_\_\_\_,  
Mother \_\_\_\_\_, brothers(s) \_\_\_\_\_,  
sister(s) \_\_\_\_\_.

What are you allergic to? \_\_\_\_\_

Do you smoke? \_\_\_\_\_ How much? \_\_\_\_\_ For how long? \_\_\_\_\_

What is your alcohol intake? \_\_\_\_\_

Have you been in the military service? Yes \_\_\_\_\_ No \_\_\_\_\_. If yes, and outside the USA,  
indicate where and when: \_\_\_\_\_

Please list any medicine and dosage you are now taking: \_\_\_\_\_

\_\_\_\_\_

What surgery have you had in the past? \_\_\_\_\_

What serious medical illnesses have you had, and/or hospitalizations? \_\_\_\_\_

\_\_\_\_\_

Please list any problems you have had with the various organ systems indicated below:

Eyes: \_\_\_\_\_

Ears, Nose and Throat: \_\_\_\_\_

Chest: \_\_\_\_\_

Breasts: \_\_\_\_\_

Lungs: \_\_\_\_\_

Heart: \_\_\_\_\_

Stomach: \_\_\_\_\_

Intestines and Colon: \_\_\_\_\_

Male/Female Organs: \_\_\_\_\_

Brain and Nervous System: \_\_\_\_\_

Other factors which you wish to call to the attention of the examining doctor:

Allergies

Adverse Effect

New Medicines

Size

When taken

Other Doctors Seen Since Last Visit

Discussions / Concerns

Changes/ Plans /Instructions

## **How to Have a Better Visit with Your Doctor**

*Use the reverse side for notes for your visit*

In this time of more paper work & less time to spend with your doctor, you can help make your visit more productive. Try a few of these suggestions at your next visit.

Come Prepared: Bring your paperwork with you.  
Insurance / Medicare / Medicaid card(s)  
Visit Co-payments  
Primary Care referral if required for your visit insurance.

Plan to have your laboratory or other tests completed before your visit, if possible.

Do some homework. Learn about your medical problems so you can have an informed discussion with your physician.

Make a list of questions & list them as most to least importance to **you**. This will help you and your physician focus on what is most important to discuss. If the list is too long for one visit, be prepared to come for a follow-up visit.

Keep a current list of your medications, the size of pill, when you take it, when you will need a refill. Include vitamins, minerals, & herbal supplements.

Inform your physician of other medical visits since you last saw him/her.

Keep your allergy list up to date.

Be forthcoming about your concerns. If you have noticed changes or new problems, tell her /him. Don't be shy about sharing your fears of illness.

Share your anxiety about a procedure or examination with your doctor. He/She can help make it easier.

Discuss your expectations. Tell your doctor what you expect him/her to do. In turn, he/she can let you know the probable course of your disorder, the treatment goals & plans.

Double-check your instructions. Make sure you understand any changes in medications, when & where tests or follow-up visits are planned, how to care for wounds. If the doctor has gone on too the next patient, you can clarify questions with the nurse or other staff.

If you are not satisfied, let the right people know. Most problems can be solved with discussion with the right person.