

NEW PATIENT HEALTH HISTORY FORM

All questions contained in this questionnaire are strictly confidential and will become part of your medical record.

Name (Last, First, M.I.):		<input type="checkbox"/> M. <input type="checkbox"/> F.	DOB:
Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Partnered <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			
Contact Phone:			
Address:			
Email:			
Previous or referring doctor:			Date of last physical exam:

Notice of Patient Privacy/Patient Consent Form

I understand that as part of my healthcare, the physicians of One to One Health originates and maintains health records describing my health history, symptoms, examination and test results, diagnosis, treatment and any plans for future care or treatment. I understand that this information is utilized to plan my care and treatment, to bill for services provided to me, to communicate with other healthcare providers and other routine healthcare operations such as assessing quality and reviewing competence of healthcare professionals.

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NOTE: One to One Health must obtain your written authorization to use your Private Health Information for any purpose other than treatment or billing. If you want One to One Health to have access to disclose your Private Health Information to your spouse or any other person during your treatment, please sign below.

Patient Signature

Date

PERSONAL HEALTH HISTORY

Childhood illness: ☐ Measles ☐ Mumps ☐ Rubella ☐ Chickenpox ☐ Rheumatic Fever ☐ Polio

Immunizations and dates:

☐ Tetanus

☐ Pneumonia

☐ Hepatitis

☐ Chickenpox

☐ Influenza

☐ MMR (Measles, Mumps, Rubella)

List any medical problems that other doctors have diagnosed

Surgeries

Year	Reason	Hospital

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Barnes



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Advanced Health Assessment and Diagnostic Reasoning Jacqueline Rhoads, 2006 What ingredients go into a thorough health history and physical examination How do effective interviewing skills thorough assessment sound clinical reasoning and accurate documentation work together to refine our diagnostic choices These are the kinds of questions you ll explore and answer inside this resource Written by a noted nurse educator this accessible text guides you through the essentials of conducting a clinically relevant assessment and applies these principles to the diagnosis of specific commonly encountered disorders BOOK JACKET

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"*Code of Massachusetts regulations, 2004*" ,2004 Archival snapshot of entire looseleaf Code of Massachusetts Regulations held by the Social Law Library of Massachusetts as of January 2020

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