


Medical History for:

Alex Tester


Last update 06/16/2007 04:41 pm EST


[Physicians & History](#)
[Disease & Conditions Checklist](#)



Please enter your physician's information below.
 Items in **Bold** must be completed.
 Items in regular type requested, not required.
 Use "Tab" to move between fields
 or place your cursor inside a data box and click.
 Click this icon  for help at any time.

Successfully added.

Medical Doctors (fill in as many as needed)
SEE QUESTIONNAIRE AT BOTTOM:

Primary Care Physician  primary

Name	Dr. Harold Jones
Specialty	Internal Medicine
Street	444 Anywhere Ave.
City	Anywhere
State	Georgia
Zip	99999
Phone	888-888-8888
Fax	888-777-7777
 Hospital Affiliation	Georgia Memorial
Hospital City, State	Atlanta, GA

 Illness(es):	 Onset	 Recovery	
Enter illness or reason for seeing doctor here	05/13/2007	05/26/2007	 
	mm/dd/yyyy	mm/dd/yyyy	

Add New Physician

primary

Name

Specialty - Select specialty -

Street

City

State - Select State -

Zip

Phone

Fax

Hospital Affiliation

Hospital City, State

HELP

ADD/SAVE

SAVE & SUBMIT

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Medical History

(please indicate below if you have been treated for any of the conditions noted)

Condition HELP	Yes	No	Comment
Abnormal Pap Smears	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
AIDS, ARC, or HIV	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Allergies	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Alzheimer's Disease	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

Aneurysm	<input type="radio"/>	<input type="radio"/>	
Angina	<input type="radio"/>	<input type="radio"/>	
Arthritis	<input type="radio"/>	<input type="radio"/>	
Asthma	<input type="radio"/>	<input type="radio"/>	
Ataxia	<input type="radio"/>	<input type="radio"/>	
Back Strains	<input type="radio"/>	<input type="radio"/>	
Bone Disease/Deformity	<input type="radio"/>	<input type="radio"/>	
Bronchitis, Chronic	<input type="radio"/>	<input type="radio"/>	

Bursitis	<input type="radio"/>	<input type="radio"/>	
Cancer	<input type="radio"/>	<input type="radio"/>	
Cardiomyopathy	<input type="radio"/>	<input type="radio"/>	
Carotid Artery Disease	<input type="radio"/>	<input type="radio"/>	
Carpal Tunnel Syndrome	<input type="radio"/>	<input type="radio"/>	
Cataracts	<input type="radio"/>	<input type="radio"/>	
Cerebral Palsy	<input type="radio"/>	<input type="radio"/>	
Chemical Dependency	<input type="radio"/>	<input type="radio"/>	

Cholesterol	<input type="radio"/>	<input type="radio"/>	
Cirrhosis of the Liver	<input type="radio"/>	<input type="radio"/>	
Colitis, Spastic Colon, Polyps	<input type="radio"/>	<input type="radio"/>	
Congenital Disorders	<input type="radio"/>	<input type="radio"/>	
Congestive Heart Failure	<input type="radio"/>	<input type="radio"/>	
Coronary Artery Disease	<input type="radio"/>	<input type="radio"/>	
Coronary Insufficiency	<input type="radio"/>	<input type="radio"/>	
Crohns Disease	<input type="radio"/>	<input type="radio"/>	

Chronic Obstructive Pulmonary Disease	<input type="radio"/>	<input type="radio"/>	
Cystitis	<input type="radio"/>	<input type="radio"/>	
Cystic Fibrosis	<input type="radio"/>	<input type="radio"/>	
Depression	<input type="radio"/>	<input type="radio"/>	
Diabetes	<input type="radio"/>	<input type="radio"/>	
Diverticulitis/Diverticulosis	<input type="radio"/>	<input type="radio"/>	
Down's Syndrome	<input type="radio"/>	<input type="radio"/>	
Ear Infections	<input type="radio"/>	<input type="radio"/>	

Endometriosis	<input type="radio"/>	<input type="radio"/>	
Emphysema/Lung Disorder	<input type="radio"/>	<input type="radio"/>	
Epilepsy and/or Seizure	<input type="radio"/>	<input type="radio"/>	
Eye Disorders	<input type="radio"/>	<input type="radio"/>	
Fibrocystic Breast Disease	<input type="radio"/>	<input type="radio"/>	
Fibromyalgia	<input type="radio"/>	<input type="radio"/>	
Fractures/Dislocations	<input type="radio"/>	<input type="radio"/>	
Gallbladder Disorder	<input type="radio"/>	<input type="radio"/>	

Gastric Reflux	<input type="radio"/>	<input type="radio"/>	
Gout	<input type="radio"/>	<input type="radio"/>	
Graves Disease	<input type="radio"/>	<input type="radio"/>	
Guillian-Barre Syndrome	<input type="radio"/>	<input type="radio"/>	
Heart Attack	<input type="radio"/>	<input type="radio"/>	
Heart Bypass	<input type="radio"/>	<input type="radio"/>	
Heart Murmur	<input type="radio"/>	<input type="radio"/>	
Hemophilia	<input type="radio"/>	<input type="radio"/>	

Hemorrhoids	<input type="radio"/>	<input type="radio"/>	
High Blood Pressure	<input type="radio"/>	<input type="radio"/>	
Hydrocephalus	<input type="radio"/>	<input type="radio"/>	
Hyperthyroidism	<input type="radio"/>	<input type="radio"/>	
Hysterectomy	<input type="radio"/>	<input type="radio"/>	
Ileostomy	<input type="radio"/>	<input type="radio"/>	
Kidney Failure	<input type="radio"/>	<input type="radio"/>	
Lou Gehrig's Disease	<input type="radio"/>	<input type="radio"/>	

Major Organ Transplant/Failure	<input type="radio"/>	<input type="radio"/>	
Meningitis	<input type="radio"/>	<input type="radio"/>	
Mental Health Disorders	<input type="radio"/>	<input type="radio"/>	
Migraines	<input type="radio"/>	<input type="radio"/>	
Motor/Sensory Aphasia	<input type="radio"/>	<input type="radio"/>	
Multiple Sclerosis	<input type="radio"/>	<input type="radio"/>	
Muscular Dystrophy	<input type="radio"/>	<input type="radio"/>	
Ovarian Cyst	<input type="radio"/>	<input type="radio"/>	

Pacemaker Implantation	<input type="radio"/>	<input type="radio"/>	
Pancreatitis	<input type="radio"/>	<input type="radio"/>	
Parkinson's Disease	<input type="radio"/>	<input type="radio"/>	
Peptic Ulcer	<input type="radio"/>	<input type="radio"/>	
Peripheral Vascular Disease	<input type="radio"/>	<input type="radio"/>	
Phlebitis	<input type="radio"/>	<input type="radio"/>	
Polycystic Kidney Disease	<input type="radio"/>	<input type="radio"/>	
Prostate Disorders	<input type="radio"/>	<input type="radio"/>	

Quadriplegia	<input type="radio"/>	<input type="radio"/>	
Renal/Kidney Failure	<input type="radio"/>	<input type="radio"/>	
Scleroderma	<input type="radio"/>	<input type="radio"/>	
Seizures	<input type="radio"/>	<input type="radio"/>	
Spina Bifida Cystica	<input type="radio"/>	<input type="radio"/>	
Spinal Disorders	<input type="radio"/>	<input type="radio"/>	
Stroke	<input type="radio"/>	<input type="radio"/>	
Systemic Lupus	<input type="radio"/>	<input type="radio"/>	

Tendonitis	<input type="radio"/>	<input type="radio"/>	
Thyroid Disorder	<input type="radio"/>	<input type="radio"/>	
TMJ	<input type="radio"/>	<input type="radio"/>	
Tonsillitis	<input type="radio"/>	<input type="radio"/>	
Transient Ischemic Attacks	<input type="radio"/>	<input type="radio"/>	
Varicose Veins	<input type="radio"/>	<input type="radio"/>	
<input type="text"/>	<input type="radio"/>	<input type="radio"/>	
<input type="text"/>	<input type="radio"/>	<input type="radio"/>	

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