William Bauer, MD, PhD, FAAN **Brendan Bauer, MD** **Steven Benedict, MD** **Nicole Danner, DO**
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34C Executive Drive
Norwalk, OH 44857
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MEDICAL HISTORY INFORMATION

Patient Name:	Date of Birth: / /	Sex: □ Male □ Female
Marital Status: □ Single □ Married □ Divorced □Separated □Widow/Widower		
Allergies to Medication:		

CURRENT MEDICATIONS			
Name of Medication	Dose	How are you taking it?	Who prescribed it

MEDICAL HISTORY							
Have you ever been diagnosed with or had any of the following:							
Asthma		**Crohn's Disease**		**Hepatitis A**		**Thyroid Disorder**	
Atrial Fibrillation		**CRF**		**Hepatitis B**		**Tuberculosis**	
Anemia		**Depression**		**Hepatitis C**		**Valvular Heart Disease**	
Anxiety		**Diabetes-Type 1**		**Infertility**		**UTI-Recurrent**	
Autoimmune Disorder		**Diabetes-Type 2**		**Kidney Disease**		**Varicose Veins/Phlebitis**	
Biliary Cirrhosis		**Diverticulitis**		**Kidney Stone**		**Abnormal Pap Smear**	
Blood Transfusions		**DVT**		**Liver Disease**		**Breast Disease**	
Brain Tumor		**GI Bleed**		**MI (Heart Attack)**		**Breast Cancer**	
Cerebrovascular Disease		**GERD**		**Neurologic Disorder**		**D E S Exposure**	
Cirrhosis		**Hemochromatosis**		**Osteoarthritis**		**Diabetes-Gestational**	
CVA/Stroke		**Hyperlipidemia**		**Osteoporosis**		**RH Sensitized**	
COPD		**Hypertension**		**PVD**		**TAH**	
Colon Cancer		**Hypothyroidism**		**PUD**		**TAH w/ BSD**	
Coronary Heart Disease		**Hyperthyroidism**		**Rheumatoid Arthritis**		**Uterine Anomaly**	
NONE		**Memory Issues**		**Seizure Disorder**		**OTHER:**	

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SURGICAL HISTORY							
Abdominal – Type: _________		Cholecystectomy		Nephrectomy Transplant			
Amputation		Colon Resection		Pacemaker		Anesthesia Problems	
AV Fistula Creation		Craniotomy		Parathyroidectomy		Surgical Complications	
AV Grait		Gastric Bypass		Pneumonectomy		Post-op Delirium	
Aortic Valve Replacement		Hemorrhoidectomy		PTCA		OTHER LIST	
Appendectomy		Hip Replacement		RAF Bypass		Anesthesia Problems	
B A-F Bypass		Interventional Pain Procedures		Rotator Cuff Repair		Surgical Complications	
Back Surgery		Knee Arthroscopy		TAH w/ BSO		Post-op Delirium	
Bilateral Mastectomy		Knee Replacement		TAH			
Breast Surgery		Kyphoplasty		Tonsillectomy			
Bronchoscopy		LA-F Bypass		Tunneled Dialysis			
CABG		Lumpectomy		U P P P			
Carotid Endarterectomy		Mitral Valve Replacement		Urinary Incontinence Surgery			
Carpal Tunnel		Nephrectomy Native		Vertebroplasty			

SOCIAL HISTORY
TOBACCO USE: □ YES □ NO □ FORMER IF YES, TYPE: □ Cigarettes □ Chew □ Cigar □ Pipe □ Other _______
Packs per day: Years Used: Year Quit:
ALCOHOL USE: □ YES □ NO □ FORMER IF YES, TYPE: □ Beer □ Wine □ Hard Liquor □ Other __________
Amount: Frequency: Year Quit:
CAFFEINE USE: □ YES □ NO IF YES, TYPE: □ Coffee □ Soda □ Tea □ Other _____________ Frequency: __________
RECREATIONAL DRUG USE: □ YES □ NO □ FORMER IF YES, TYPE: _______________ Year Quit: ___________

FAMILY HISTORY							
Please Enter: M = Mother, F = Father, S = Sister, B = Brother, O = Other							
Alive and Well		CVA (Stroke)		Mental Illness			
ADD/ADHD		Depression		Migraines			
Alcoholism		Developmental Delay		Obesity			
Allergies		Diabetes		Osteoarthritis			
Alzheimer's Disease		Eczema		Osteoporosis			
Asthma		Hearing Deficiency		Vascular Disease			
Blood Disease		High Cholesterol		Kidney Disease			
Heart Disease		High Blood Pressure		Seizure Disorder			
Cancer		Irritable Bowel Disease		OTHER			
Type:		Learning Disability					