

Visit Check-in Form for use with Electronic Medical Record rev. 7 14 16

WELCOME to Emmanuel Christian Health Center!!

Vivian J. Woodard, M.D. Courtland L. Munroe, M.D. Board Certified in Internal Medicine
918 Rolling Acres Rd., Suite 1, Lady Lake, FL 32159 (352) 259-1991

FLU, PNEUMONIA, SHINGLES, & TETANUS VACCINES ARE AVAILABLE DURING YOUR VISIT.

Full Name \_\_\_\_\_ Date of birth \_\_\_/\_\_\_/\_\_\_ today's date \_\_\_/\_\_\_/\_\_\_

1. Reason for your visit: follow-up\_\_\_ new sickness\_\_\_ pap\_\_\_ physical\_\_\_ refills\_\_\_ mammogram order\_\_\_
Review: blood tests\_\_\_ x-rays\_\_\_ other tests\_\_\_ When were tests done?\_\_\_\_\_ Which lab?\_\_\_\_\_
For other problems, write details here:

2. Please review the medicine list we have on file for you and let us know if there are corrections or additions.
List ALL medicines you need us to refill today or check here if none needed\_\_\_

3. Check if allergic to: No allergies\_\_\_ Penicillin\_\_\_ Amoxicillin\_\_\_ Cipro\_\_\_ Sulfa\_\_\_ Latex\_\_\_
Bactrim\_\_\_ Erythromycin\_\_\_ Aspirin\_\_\_ Codeine\_\_\_ Iodine\_\_\_ Morphine\_\_\_ Flu shots\_\_\_
For your safety we update allergies at each visit. Please list any other medication allergies you have:

4. Cigarette use: never smoked\_\_\_ quit\_\_\_ when?\_\_\_\_\_ still smoke\_\_\_ \_\_\_ packs a day want to quit\_\_\_

Vaccine Recommendations: Pneumonia vaccine is needed at any age if you smoke, have asthma, diabetes, heart, lung or kidney disease. CDC & Medicare also recommend a one-time dose of TWO DIFFERENT PNEUMONIA VACCINES (Pneumovax-23 and NEW Prevnar-13) for seniors 65 or older. Shingles vaccine advised if you are 50 or over and have never had the vaccine. Tetanus shot needs a booster every 10 years. Flu shots yearly for all ages.

5. Check if you need a: pneumonia shot\_\_\_ shingles shot\_\_\_ flu shot\_\_\_ tetanus shot\_\_\_
Check if you need these other preventive services: Medicare Wellness Exam\_\_\_ foreign travel vaccines\_\_\_
EKG\_\_\_ pap\_\_\_ physical\_\_\_ colonoscopy\_\_\_ mammogram\_\_\_ Dexa scan\_\_\_ hepatitis B shot\_\_\_

6. Addressing new symptoms early may prevent serious illness. Are you having any of these symptoms?

GENERAL: fever\_\_\_ chills\_\_\_ poor appetite\_\_\_ tiredness\_\_\_ weight loss without trying\_\_\_
LUNGS: short of breath at rest\_\_\_ short of breath with exercise\_\_\_ wheezing\_\_\_
dry cough\_\_\_ cough up blood\_\_\_ cough up green or yellow mucus\_\_\_ loud snoring\_\_\_
CIRCULATION: chest pain, pressure, or tightness\_\_\_ short of breath lying flat\_\_\_ ankle swelling\_\_\_
dizzy spells\_\_\_ fainting\_\_\_ palpitations (heart fluttering or racing)\_\_\_ calf of leg hurts when walking\_\_\_
GI: nausea\_\_\_ vomiting\_\_\_ diarrhea\_\_\_ constipation\_\_\_ stomach pain\_\_\_ heartburn\_\_\_
blood in bowel movements\_\_\_ black bowel movements\_\_\_ trouble swallowing\_\_\_
URINARY: pain or burning with urination\_\_\_ increased frequency of urination\_\_\_ blood in urine\_\_\_
NEUROPSYCHIATRIC: numbness or tingling\_\_\_ temporary loss of vision\_\_\_ double vision\_\_\_
weakness of arm or leg\_\_\_ slurring or loss of speech\_\_\_ feel depressed\_\_\_ suicide thoughts\_\_\_
ENDOCRINE: excessive thirst\_\_\_ dry mouth\_\_\_ urinate large amounts\_\_\_ sensitive to cold or heat\_\_\_
FEMALE: vaginal bleeding after menopause\_\_\_ hot flashes\_\_\_ breast lump\_\_\_ breast pain\_\_\_ Are you
already scheduled for your next mammogram? yes\_\_\_ no\_\_\_ Do you need a mammogram order from us? yes\_\_\_ no\_\_\_
Please check here if you have none of the above symptoms\_\_\_
Describe any other new symptoms you have:

STAFF ONLY WRITE BELOW THIS LINE

BP \_\_\_/\_\_\_ Pulse \_\_\_ PO2 \_\_\_ Temp. \_\_\_°F WT \_\_\_lbs. HT \_\_\_in.

Repeat BP \_\_\_/\_\_\_

Di- ST\_\_\_
Ex- ET\_\_\_
Spec- TT\_\_\_
BP-
BS-