

## **NEW PATIENT INTAKE (MALE)**

First Name		MI	L	ast Name				Medical Record	
PREFERRED PHARMA		\ddress/P	hone)	:					
MY MAIN PROBLEMS			,						
					· ·			Blood in urine	
<ul><li>☐ Bladder Infection</li><li>☐ Kidney S</li><li>☐ Bladder Cancer</li><li>☐ Prostate</li></ul>							<ul><li>☐ Urinary Incontinence</li><li>☐ Overactive Bladder</li></ul>		
					☐ Erectile Dysfunction ☐ Other:				
☐ Infertility		ımp in Testi	icie	□ Other: _					
ALLERGIES:   None	$\square$ PCN	☐ Sulfa		Cipro 🗆 Io	dine/Cont	trast			
□ Other:									
MEDICATIONS:									
<u>IVIEDICATIONS</u> .									
CLIDGICAL HISTORY.	□ No Chana					al. /I Ii.a /IV.a a a		Contanana	
			-	opendectomy	-			Cystoscopy	
	one Surgery				•			Lithotripsy	
☐ Prostate Surgery	☐ Prostate S	eed	⊔ O1	ther:					
MEDICAL HISTORY:	$\square$ No Change	es	☐ Di	abetes	☐ Em	nphysema		Heart Attack	
☐ Heart Murmur	$\square$ Hepatitis		□ Не	ernia	□ Ну	pertension	☐ Parkinso	n's	
☐ Strokes	$\square$ Cancer: ( $\square$	Kidney [	□ Teste	es 🗆 Prostate 🗆	Other Ca	ncer		)	
☐ Other:									
FAMILY HISTORY:	□ Pr	ostate Cand	cer	☐ Kidney Can	cer 🗆	Kidney Sto	nes 🗆	Heart Disease	
		Occupation:							
SOCIAL HISTORY:		ipation:						Retired	
SOCIAL HISTORY:	Осси					□ Divorc			
SOCIAL HISTORY:	Осси	tal Status:		ngle 🗆 Ma	arried			Retired Widowed	
_	Occu Mari	tal Status:	☐ Sir	ngle 🗆 Ma	arried				
MY SYMPTOM(S):	Occu Mari Smol	tal Status: ke:	☐ Sir	ngle □ Ma o □ Ye	arried S	□ Divorc			
MY SYMPTOM(S): General/Constitutional	Occu Mari Smol □ Fe	tal Status: ke: ever	□ Sir	ngle	arried		ed 🗆		
MY SYMPTOM(S): General/Constitutional Eyes	Occu Mari Smol	tal Status: ke: ever urry Vision	□ Sir	ngle	arried S S on	☐ Divorc ☐ Chills ☐ Catar	ed 🗆		
MY SYMPTOM(S): General/Constitutional Eyes Ears, Nose, Mouth, Throat	Occu Mari Smol	tal Status: ke: ever	□ Sir	ngle	arried 5 5 5 on ness	☐ Divorc ☐ Chills ☐ Catar ☐ Sore	ed  acts	Widowed	
MY SYMPTOM(S): General/Constitutional Eyes Ears, Nose, Mouth, Throat Cardiovascular	Occu Mari Smol	tal Status: ke: ever urry Vision earing Loss nest Pains	□ Sir	ngle	arried S S S On ness kles	☐ Divorc ☐ Chills ☐ Catar ☐ Sore	ed 🗆	Widowed	
MY SYMPTOM(S): General/Constitutional Eyes Ears, Nose, Mouth, Throat Cardiovascular Respiratory	Occu Mari Smol Fe Bl Ho Ch	tal Status: ke: ever urry Vision earing Loss nest Pains 'heezing	□ Sir	ngle	arried s s on ness kles	☐ Divorc ☐ Chills ☐ Catar ☐ Sore ☐ Irregu ☐ Short	ed   acts  Throat  llar Heartbe	Widowed eat ath	
MY SYMPTOM(S): General/Constitutional Eyes Ears, Nose, Mouth, Throat Cardiovascular Respiratory Gastrointestinal	Occu Mari Smol	tal Status: ke: ever urry Vision earing Loss nest Pains /heezing	□ Sir □ No	mgle	arried  s on ness kles ugh miting	☐ Divorc ☐ Chills ☐ Catar ☐ Sore ☐ Irregu ☐ Short ☐ Chang	ed	Widowed eat ath	
MY SYMPTOM(S): General/Constitutional Eyes Ears, Nose, Mouth, Throat Cardiovascular Respiratory Gastrointestinal Genitourinary	Occu Mari Smol	tal Status: ke: ever urry Vision earing Loss nest Pains theezing odominal Pa continence	□ Sir □ No	weight Los Weight Los Double Visi Nasal Stuffi Swollen An Chronic Cou	arried  s  on  ness kles agh miting ation	☐ Divorc ☐ Chills ☐ Catar ☐ Sore ☐ Irregu ☐ Short ☐ Chan	ed   acts Throat lar Heartbe ness of Bre ge in Bowel in Urine	Widowed eat ath	
MY SYMPTOM(S): General/Constitutional Eyes Ears, Nose, Mouth, Throat Cardiovascular Respiratory Gastrointestinal Genitourinary Musculoskeletal	Occu Mari Smol	tal Status: ke: ever urry Vision earing Loss nest Pains heezing odominal Pa continence	□ Sir □ No	ngle	arried  5  5  5  6  6  6  6  6  6  6  6  6  6	☐ Divorc ☐ Chills ☐ Catar ☐ Sore ☐ Irregu ☐ Short ☐ Chan	acts Ihroat Ilar Heartbe ness of Bre ge in Bowel in Urine Muscles	Widowed eat ath s	
MY SYMPTOM(S): General/Constitutional Eyes Ears, Nose, Mouth, Throat Cardiovascular Respiratory Gastrointestinal Genitourinary Musculoskeletal Integumentary/Skin	Occu Mari Smol	tal Status: ke: ever urry Vision earing Loss nest Pains heezing odominal Pa continence nronic Back ash	□ Sir □ No	mgle	arried  5  5  5  6  6  6  6  6  6  6  6  6  6	☐ Divorc ☐ Chills ☐ Catar ☐ Sore ☐ Irregu ☐ Short ☐ Chang ☐ Blood ☐ Sore ☐	acts Throat Ilar Heartbe ness of Bre ge in Bowel in Urine Muscles Cancer Histo	Widowed eat ath s	
MY SYMPTOM(S): General/Constitutional Eyes Ears, Nose, Mouth, Throat Cardiovascular Respiratory Gastrointestinal Genitourinary Musculoskeletal Integumentary/Skin	Occu Mari Smol	tal Status: ke: ever urry Vision earing Loss nest Pains heezing odominal Pa continence nronic Back ash umbness	□ Sir □ No ain Pain	mgle	arried  s  on  ness kles agh miting ation ck Pain	☐ Divorc ☐ Chills ☐ Catar ☐ Sore ☐ Irregu ☐ Short ☐ Chang ☐ Blood ☐ Sore ☐ Skin C	acts Throat Ilar Heartbe ness of Bre ge in Bowel in Urine Muscles Cancer Histo	eat ath s	
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MY SYMPTOM(S): General/Constitutional Eyes Ears, Nose, Mouth, Throat Cardiovascular Respiratory Gastrointestinal Genitourinary Musculoskeletal Integumentary/Skin Neurologic Hematologic/Lymphatic	Occu Mari Smol   Fe   Bl   Ch   Ch   Al   In   Ch   Ra   Ni   Sw	tal Status: ke: ever urry Vision earing Loss nest Pains heezing odominal Pa continence nronic Back ash umbness	□ Sir □ No Pain	mgle	arried  s  on  ness kles agh miting ation ck Pain cching leeding	☐ Divorc ☐ Chills ☐ Catar ☐ Sore ☐ Irregu ☐ Short ☐ Chang ☐ Sore ☐ Skin C ☐ Dizzir ☐ Trans	acts Throat Ilar Heartbe ness of Bre ge in Bowel in Urine Muscles Cancer Histo ess fusion Histo	eat ath s	

In compliance with California OHSA Title 8, Section 5199, healthcare facilities must prescreen patients for aerosol transmissible diseases. Please let the nurse know if you have any of the following:

Yes No History or Symptoms of Tuberculosis (productive cough, bloody sputum, fever, malaise, night sweats, unexplained weight loss)

Yes No Flu & Other Aerosol transmissible diseases, including pertussis, measles, mumps, rubella, chicken pox, meningitis