RISE RETINA INSTITUTE OF THE SOUTHEAST
COMPASSIONATE, PERSONALIZED, EXPERT CARE

115 Dogwood Drive, Waynesboro, GA 30830
Tel 706-535-RISE (7473)
Fax 706-740-RISE (7473)
www.retinaise.com

Patient History Form

Patient Name: **Date:**

Ocular Medical History:

Ocular Surgical History:

Medical History:

	Flu Vaccination		Rheumatoid Arthritis		TIA
	Pneumonia Vaccination		Crohns Disease		Lupus
	Diabetes		Thyroid Disease		Temporal Arteritis
	High Blood Pressure		AIDS/HIV		Sickle Cell Disease
	Heart Disease		Migraines		Sarcoidosis
	Stroke		Liver Disease		OTHER:
	Kidney Disease		Parkinsons Disease		
	High Cholesterol		Cancer		

Surgical History:

Current Medications:

Allergies and Drug Reactions:

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Patient History Form

Family History:

	Diabetes		Rheumatoid Arthritis		Cancer
	High Blood Pressure		Crohns Disease		Lupus
	Heart Disease		Thyroid Disease		Temporal Arteritis
	Stroke		AIDS/HIV		Sickle Cell Disease
	Kidney Disease		Migraines		Sarcoidosis
	High Cholesterol		Liver Disease		OTHER:

Social History:

Do you smoke?_____ If currently smoking, how many packs per week?_____

Do you drink alcohol?_____

If current drinker, how often? Social _____ 1-2 drinks/day_____3+ drinks/day_____

How many times have you fallen? No falls this year_____

1+ times of Fall this current year_____

2 or more times fall with injury this current year_____

Review of Systems: If you are **currently** having any problems in the following areas, please circle below.

Allergy/Immunology: environmental allergies, food allergies, other:

Cardiovascular: chest pressure, discomfort, irregular heartbeat, other:

Constitutional: fatigue, fever, night sweats, other:

Endocrine: cold intolerance, heat intolerance, other:

Gastrointestinal: constipation, diarrhea, vomiting, other:

Genitourinary: frequent urination, incontinence, back pain, other:

Hematology/Oncology: bruising, easy bleeding, swelling, other:

Ear, Nose, Throat: hearing loss, sinus problems, hoarseness, other:

Skin: rash, skin lesion, infection, other:

Musculoskeletal: joint swelling, muscle weakness, stiffness, other:

Neurological: dizziness, tremors, headache, other:

Psychiatric: mood swings, anxiety, depression, other:

Respiratory: cough, wheezing, snoring, other: