

◆ **HISTORY = MINIMUM OUTPATIENT REQUIREMENTS PLUS EXAM SPECIFIC TO COMPLAINT/PROPOSED PROCEDURE AND ANY RELEVANT COMORBID CONDITIONS**
Dictated H&P available on Health Link

PATIENT LABEL

◆ HISTORY OF PRESENT ILLNESS: _____ NONE
◆ CURRENT MEDICATIONS: _____ NONE
◆ ALLERGIES/MEDICATION REACTIONS: _____ NONE
◆ EXISTING CO-MORBID CONDITIONS: _____ NONE

RELEVANT PAST MEDICAL HX: _____ NONE

RELEVANT SOCIAL HX: _____ NONE

RELEVANT FAMILY HX: _____ NONE

REVIEW OF SYSTEMS: _____ WNL

Pre-op ECG within 6 months if: > 60 years old or documented cardiac disease or history of hypertension > 40 years of age or diabetic > 40 years of age

◆ PHYSICAL BP _____ HR _____ HEIGHT _____ WEIGHT _____ LBS. _____ KG.

WNL

MENTAL STATUS: _____

HEENT: _____

◆ LUNGS: _____

BREASTS: _____

◆ HEART: _____

ABDOMEN: _____

◆ IMPRESSION: _____

◆ TX PLAN/PROCEDURE: _____

WNL

PELVIC: _____

RECTAL: _____

EXTREMITIES: _____

NEUROMUSCULAR: _____

OTHER: _____

M.D. SIGNATURE DATE TIME PM

PATIENT INSTRUCTED TO ARRANGE RIDE HOME AND SOMEONE TO STAY WITH PT. THE 1ST NIGHT AFTER SURGERY.

H&P is to be sent or faxed to MSC as soon as possible prior to surgery.

H&P is valid for 30 days prior to DOS.

Fax completed H&P and pertinent documentation to (608) 287-2228 Attention: Pre-Admission

