Steadman Family Dentistry Stony Point Medical Park 9220 Forest Hill Ave., Ste. A5 Richmond, VA 23235

Signature of Patient (or Patient Representative):___



Drs. Robert & Grant Steadman

Phone: 804-272-3200 Fax: 804-330-5516 www.steadmandental.com

Date:_

MEDICAL HISTORY & GENERAL HEALTH INFORMATION

Before starting treatment, we need some basic health information to ensure we provide the best oral care possible. All information is confidential.

GENERAL INFORMAT	101	N					
Patient Name:				Date of Birth(MM/DD/YY):			
Who is your Primary Care Physician(PCP)?					La	st Exam Date:	
		you are currently taking:					
riease list any medicatio	11(5)	you are currently taking.	•				
Are you allergic to: ⋈ As	pirir	n 🎖 Penicillin 🖟 Codeine 🖟	∂ Loc	al Anesthetics	₩ Met	al $ \mathbb{W} $ Latex $ \mathbb{W} $ Household Bleach	
Please list any other aller	rgie	s:					
Have you ever taken: 🖫	Phe	n-Fen Redux Reosamax	ে নি F	Boniva R Actonel R Oth	er Bispl	nosphonate:	
-						r head or neck? 뭐 Yes 뭐 No	
nave you ever been nos	orta	пиес, пас а тајог орега	tion,	or flad a filajor filjury	to you	Thead of neck: Wifes Wind	
Are you taking any herba	al su	appplements or on a spe	cial c	liet? 77 Yes 77 No			
		-					
Do you use any controlle	d s	ubstances? ☐ Yes ☐ No					
₹ Are you currently pro	ana	ent or trying to got progr	22p+2) UVaa UNa Arav	ou cur	rently nursing? $ abla ext{ Yes } abla ext{No}$	
ž		•					
Are you currently tak	ing	oral contraceptives? ♂ \	Yes (กิ No			
MEDICAL CHECKLIST	(PI	ease check all that apply)		All information is kept strict	ly confic	lential.	
AIDS/HIV Positive	N	Convulsions	R	Hepatitis A	R R	Radiation Treatments	
Alzheimer's Disease	য্য	Cortisone Medicine Diabetes	2	Hepatitis B or C Herpes	<u>지</u>	Recent Weight Loss \overline{W} Renal Dialysis \overline{W}	
Anaphylaxis Anemia	2	Drug Addiction	2	High Blood Pressure	8	Rheumatic Fever	
Angina	W	Emphysema	M	High Cholesterol	\\ \(\text{\text{\$\pi}} \)	Scarlet Fever	
Arthritis/Gout	M	Epilepsy or Seizures	M	Hives or Rash	R	Shingles \square	
Artificial Heart Valve	W	Excessive Bleeding	M	Hypoglycemia	\overline{R}	Sickle Cell Disease	
Artificial Joint	W	Fainting Spells/Dizziness	W	Irregular Heartbeat	Image: Control of the	Sinus Trouble	
Asthma	M	Frequent Cough	M	Kidney Problems	M	Spina Bifida 🛛 🗑	
Blood Disease	M	Frequent Diarrhea	M	Leukemia	M	Stomach/Intestinal Disease 🛭 🖁	
Blood Transfusion	M	Frequent Headaches	M	Liver Disease	R	Stroke 🖁	
Breathing Problems	M	Glaucoma	M	Low Blood Pressure	<u> </u>	Swelling of Limbs ਸ਼ਿ	
	M		M				
				•			
1.2							
						1	
Bruise Easily Cancer Chemotherapy Chest Pains Cold Sores/Fever Blisters Congenital Heart Disorder	যয্যয্য	Hay Fever Heart Attack/Failure Heart Murmur Heart Pacemaker Heart Trouble/Disease Hemophilia ss not listed above? \$\tilde{W}\$ Ye	R R R R R R	Lung Disease Mitral Valve Prolapse Osteoporosis Pain in Jaw Joints Parathyroid Disease Psychiatric Care	22222	Thyroid Disease Tonsillitis Tuberculosis Ulcers Yellow Jaundice Other: (please detail below)	

MEDICAL CHECKLIST (Please check all that apply)

(Please check all that apply)

AIDS/HIV Positive	\square	Convulsions	\mathbb{R}	Hepatitis A	M	Radiation Treatments	\bowtie
Alzheimer's Disease	W	Cortisone Medicine	W	Hepatitis B or C	R	Recent Weight Loss	\square
Anaphylaxis	W	Diabetes	\square	Herpes	W	Renal Dialysis	\square
Anemia	W	Drug Addiction	\square	High Blood Pressure	R	Rheumatic Fever	\square
Angina	W	Emphysema	\square	High Cholesterol	M	Scarlet Fever	\square
Arthritis/Gout	W	Epilepsy or Seizures	\square	Hives or Rash	R	Shingles	\square
Artificial Heart Valve	W	Excessive Bleeding	\square	Hypoglycemia	M	Sickle Cell Disease	\square
Artificial Joint	W	Fainting Spells/Dizziness	\square	Irregular Heartbeat	R	Sinus Trouble	\square
Asthma	W	Frequent Cough	\square	Kidney Problems	M	Spina Bifida	\square
Blood Disease	W	Frequent Diarrhea	\square	Leukemia	M	Stomach/Intestinal Disease	\square
Blood Transfusion	W	Frequent Headaches	\square	Liver Disease	\square	Stroke	\square
Breathing Problems	W	Glaucoma	W	Low Blood Pressure	M	Swelling of Limbs	\square
Bruise Easily	\square	Hay Fever	\square	Lung Disease	\square	Thyroid Disease	\square
Cancer	W	Heart Attack/Failure	W	Mitral Valve Prolapse	M	Tonsillitis	\square
Chemotherapy	\square	Heart Murmur	\mathbb{R}	Osteoporosis	\square	Tuberculosis	\square
Chest Pains	W	Heart Pacemaker	W	Pain in Jaw Joints	M	Ulcers	\square
Cold Sores/Fever Blisters	\square	Heart Trouble/Disease	\bowtie	Parathyroid Disease	R	Yellow Jaundice	\square
Congenital Heart Disorder	M	Hemophilia	W	Psychiatric Care	R	Other: (please detail below)	\square

AIDS/HIV Positive	M
Alzheimer's Disease	W
Anaphylaxis	M
Anemia	W
Angina	M
Arthritis/Gout	W
Artificial Heart Valve	M
Artificial Joint	W
Asthma	M
Blood Disease	W
Blood Transfusion	M
Breathing Problems	R
Bruise Easily	M
Cancer	R
Chemotherapy	W
Chest Pains	W
Cold Sores/Fever Blisters	W
Congenital Heart Disorder	W

Convulsions	W
Cortisone Medicine	W
Diabetes	W
Drug Addiction	W
Emphysema	W
Epilepsy or Seizures	W
Excessive Bleeding	W
Fainting Spells/Dizziness	W
Frequent Cough	M
Frequent Diarrhea	W
Frequent Headaches	\square
Glaucoma	W
Hay Fever	W
Heart Attack/Failure	N
Heart Murmur	W
Heart Pacemaker	W
Heart Trouble/Disease	W
Hemophilia	W

Hepatitis A	M
Hepatitis B or C	W
Herpes	W
High Blood Pressure	W
High Cholesterol	W
Hives or Rash	W
Hypoglycemia	W
Irregular Heartbeat	W
Kidney Problems	W
Leukemia	W
Liver Disease	W
Low Blood Pressure	M
Lung Disease	W
Mitral Valve Prolapse	R
Osteoporosis	W
Pain in Jaw Joints	R
Parathyroid Disease	W
Psychiatric Care	W

Radiation Treatments	M				
Recent Weight Loss					
Renal Dialysis	\square				
Rheumatic Fever	R				
Scarlet Fever	\square				
Shingles	R				
Sickle Cell Disease	\square				
Sinus Trouble	M				
Spina Bifida	\square				
Stomach/Intestinal Disease	R				
Stroke	\square				
Swelling of Limbs	R				
Thyroid Disease					
Tonsillitis					
Tuberculosis					
Ulcers	R				
Yellow Jaundice	\square				
Other: (please detail below)	N				

MEDICAL CHECKLIST (Please check all that apply)

(Please check all that apply)

AIDS/HIV Positive Alzheimer's Disease	20 20	Convulsions	R	Hepatitis A	R	Radiation Treatments	
Alzheimer's Disease					۷ ۷	Nadiation Heatinents	\bowtie
7 112110111101 0 2 10 0 0 0 0	VV	Cortisone Medicine	M	Hepatitis B or C	R	Recent Weight Loss	R
Anaphylaxis	M	Diabetes	M	Herpes	M	Renal Dialysis	\square
Anemia	R	Drug Addiction	M	High Blood Pressure	R	Rheumatic Fever	M
Angina	M	Emphysema	M	High Cholesterol	M	Scarlet Fever	M
Arthritis/Gout	R	Epilepsy or Seizures	M	Hives or Rash	R	Shingles	M
Artificial Heart Valve	M	Excessive Bleeding	\square	Hypoglycemia	\square	Sickle Cell Disease	\square
Artificial Joint	R	Fainting Spells/Dizziness	M	Irregular Heartbeat	R	Sinus Trouble	\square
Asthma	M	Frequent Cough	M	Kidney Problems	M	Spina Bifida	\square
Blood Disease	R	Frequent Diarrhea	M	Leukemia	R	Stomach/Intestinal Disease	\square
Blood Transfusion	M	Frequent Headaches	M	Liver Disease	M	Stroke	\square
Breathing Problems	R	Glaucoma	M	Low Blood Pressure	R	Swelling of Limbs	\square
Bruise Easily	M	Hay Fever	M	Lung Disease	M	Thyroid Disease	\square
Cancer	R	Heart Attack/Failure	R	Mitral Valve Prolapse	R	Tonsillitis	R
Chemotherapy	M	Heart Murmur	M	Osteoporosis	M	Tuberculosis	\square
Chest Pains	R	Heart Pacemaker	M	Pain in Jaw Joints	R	Ulcers	R
Cold Sores/Fever Blisters	R	Heart Trouble/Disease	M	Parathyroid Disease	R	Yellow Jaundice	M
Congenital Heart Disorder	R	Hemophilia	M	Psychiatric Care	R	Other: (please detail below)	R