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NEW PATIENT QUESTIONNAIRE

Welcome to the practice. So that we can get to know a bit more about you, please complete some health information.

Name……Date of birth……
Address (flat number?)……Telephone number……
……Marital status……..
……Occupation……
……
Post Code……

Next of kin name ……
Next of kin relationship ……
Next of kin telephone ……

Have you ever registered here or at our other surgery (4 Laurel street) before?

……

Have you had any illnesses or operations in the past? If so please give details below……
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……
……
……
……

Are you taking any regular medication at present? If so please give details of medication names and dosages……
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……
……
……
……

Are you allergic to anything? If so please give details.
……
……

FOR GP USE ONLY: NEW PATIENT NURSE APPT ☐
NEW PATIENT DOCTOR APPT ☐

PTO

Smoking?..Please tick one of the following:
Never smoked ☐
Ex-smoker ☐ If ex-smoker approx when did you stop? ……..
Approx how many did you smoke per day? ……
Current smoker ☐ Would you like any help to stop smoking?.....
Approx how many do you smoke per day? ……

Do you drink alcohol? If so, how many units per week? (A unit is one small glass of wine, a measure of spirits or half a pint of beer.)……..
Do you take any regular exercise? Ideally you should aim to do some kind of aerobic exercise three times per week.
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Do you have any family history which may be relevant to your health? For example heart disease, strokes, diabetes. (Please state age at diagnosis if possible).
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……
……

Do you have any drug problems?
……
……

Do you look after someone, or help to look after someone, without payment because they cannot manage on their own? If so, what is their relationship to you?
.....
.....

FOR WOMEN ONLY:

What was your maiden name?.....
When was your last cervical smear test?.....
Do you have any children?.....
If so, names and ages?.....
Have you had any other pregnancies (miscarriages, terminations etc?)……..
Did you have any problems during the pregnancies?.....
……
……

Thank you for taking the time to complete this questionnaire.

If you would like an appointment with the nurse or doctor, please ask at reception.