

Patient's Name

Birth Date

PAST HISTORY

BIRTH:

Hospital	Doctor	Birth Weight	Length
Term	Premature	No. weeks gestation	Preg. Uncomplicated
Complications: Bleeding	Toxemia	Infection	Other
Labor: Uncomplicated	Other		
Delivery:			
Vaginal	Routine		
C-Section	Reason:	Repeat	CPD
	Fetal Distress	Breech	Other

NEONATAL (check all that apply)

Uncomplicated	Jaundice	Rx Required	
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Other:

FEEDINGS: Breast	Weaned at	Formula	Type
No. of Months	Food Intolerance	Solids Started	Colic
Appetite Now	Vitamins		Other

DEVELOPMENT(Please list at what age patient did the following)

Smiled	Rolled over	Sat w/o Support	Walked
First Words	Potty Trained	Present grade in school	
Present performance in school			

ILLNESSES (check all that apply to patient's history)

CHILDHOOD INFECTIOUS DESEASES:

Measles	Chicken pox	Scarlet fever	
Mumps	Roseola	Mono	
Rubella	Fifths Disease	Other	

OTHER MEDICAL ILLNESES:

Ear Infection	Bronchitis	Other	
Tonsilitis	Pneumonia		
Sinus Infection	Urinary Tract Infection		
Seizures	Recurrent Respiratory Infection		
Croup	Anemia		

SURGERIES:

ACCIDENTS OR INJURIES:

HOSPITALIZATIONS:

ALLERGY: Eczema	Hay fever	Hives	Asthma
Onset	Frequency	Medications	
Drug Sensitivities:	Medication	Age	Type reaction

