Patient Health Survey

Thank you for taking the time to complete this health survey. Your responses will help us better understand your health status and provide you with the best care possible.

Personal Information

Name:Maverick Harris

Date of Birth:January 15, 1985

Gender: ☑ Male ☐ Female ☐ Other:

Contact Number: +18168487871

Email: maverick.harris@email.com

General Health

a. How would you rate your overall health?

☐ Poor ☐ Fair ◉ Good ☐ Excellent

b. Do you have any chronic medical conditions?

☐ Yes ◉ No

If yes, please list them.

" Aspirin 81mg daily
" Simvastatin 20mg nightly

c. Are you currently taking any medications?

☐ Yes ◉ No

If yes, please provide details.

Lifestyle

a. Do you smoke?

◉ Yes ☐ No

If yes, how many cigarettes per day?

If yes, how many cigarettes per day: 10

b. Do you consume alcohol?

☑ Yes ☐ No

If yes, how many drinks per week?

2-3 times a week

c. How would you describe your diet?

☐ Unhealthy ◉ Moderately Healthy ☐ Healthy

d. How often do you engage in physical activity?

☐ Never ☐ Rarely ◉ Occasionally ☐ Regularly

Family Medical History

Are there any significant medical conditions or diseases that run in you family? Please specify.

Yes. Diabetes (father), Hypertension (mother)

Mental Health

a. Have you ever been diagnosed with a mental health condition?

☐ Yes ◉ No

If yes, please provide details.

b. How would you rate your stress level on a scale of 1 to 10?

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Allergies

Do you have any known allergies?

☐ Yes ◉ No

If yes, please specify the allergies.

Immunizations

Are your vaccinations up to date?

☑ Yes ☐ No

If not, please specify which ones are overdue.

Women's Health (if applicable)

a. Are you pregnant or trying to conceive?

☐ Yes ◉ No

b. Last menstrual period (if applicable):

Recent Health Events

Have you have any surgeries, hospitalizations, or significant health events in the past year?

☐ Yes ◉ No

Please provide details.

Additional Comments

Is there anything else you would like to share about your health that has not been covered in the survey?

Thank you for completing the survey! Your health information is confidential and will be used for healthcare purposes only. Please contact us if you have any concerns or questions.