Amberley
MEDICAL CENTRE

New Patient Medical Questionnaire

Aged 14+ to complete and return with your Enrolment Form

Patient Name: **Date of Birth:** **Today's Date:**

Do you have any, or have had any of the following medical conditions:

Diabetes	☐ Yes ☐ No	High Blood Pressure	☐ Yes ☐ No
Heart Disease	☐ Yes ☐ No	Heart Attack	☐ Yes ☐ No
Asthma, lung conditions	☐ Yes ☐ No	Kidney Disease	☐ Yes ☐ No
Liver Disease	☐ Yes ☐ No	Bowel Disease	☐ Yes ☐ No
Joint issues or arthritis	☐ Yes ☐ No	Depression and or anxiety	☐ Yes ☐ No
Blood Clots/disorder	☐ Yes ☐ No	Mental Health illnesses	☐ Yes ☐ No
Stroke	☐ Yes ☐ No	High cholesterol	☐ Yes ☐ No
Migraines	☐ Yes ☐ No	Epilepsy	☐ Yes ☐ No
Cancer, inc skin cancer	☐ Yes ☐ No	Eye Conditions	☐ Yes ☐ No
Eczema	☐ Yes ☐ No	Hayfever	☐ Yes ☐ No

Does your family have any history of:

Heart Attacks	☐ Yes ☐ No	Heart Disease	☐ Yes ☐ No
Diabetes	☐ Yes ☐ No	Cancer	☐ Yes ☐ No

If you have answered yes to any of the above can you please give more details:

Do you have any other health, disability problems or inherited conditions? Please list:

Please list any regular medications that you take:	**When is your next Prescription due?**

Have you any ongoing ACC Claims: ☐ Yes ☐ No

Are you allergic to anything, especially medications? ☐ Yes (Type of reaction) ☐ No

Do you drink alcohol? : ☐ Yes ☐ No

If yes, on average, how much day/week: _____

Do you Smoke? ☐ Yes ☐ No ☐ Ex-Smoker

Do you Vape? ☐ Yes ☐ No ☐ Ex-Vaper

Do you have any substance abuse problems? ☐ Yes ☐ No

Are your immunisations up to date? ☐ Yes ☐ No ☐ Don't know

Woman (aged over 25 years):

When was your most recent cervical smear or HPV test: _____

Have you ever had an abnormal smear?: ☐ Yes ☐ No ☐ Don't know

Have you had a mammogram (over 45 years) : ☐ Yes ☐ No ☐ Don't know

Any other information that you would like to share with your Clinician prior to the first appointment:

Thank you for completing this form.

We will use this form to update your information and review the information at your New Patient Health Check with our Health Care Assistant.