

HISTORY AND PHYSICAL

Chief Complaint				
Past History				
Family History				
Allergies				
Operations (Minor)				
Operations (Major)				
Physical Findings BP	Temp	Pulse	Resp.	Weight
Head				
Neck				
Chest				
Cardio-Vascular				
Abdominal				
Genito-Urinary				
Skin				
Bones and Joints				
Glandular				
Neuromuscular				
Pain: Present Yes	No	Date of Onset		
Origin				Location
Current Diagnosis				
Rehabilitation Potential				
Patient Informed of Medical Condition Yes	No			
If No, give reason				
Advance Directives Yes	No			
Date	Attending Physician's Signature			

Name: Last, First, Middle	Physician	Record No.	Room/Bed