

## PATIENT HEALTH HISTORY

Your name \_\_\_\_\_

Today's date \_\_\_\_\_

Your regular dentist is \_\_\_\_\_

Your physician is \_\_\_\_\_

Ever been a patient here before? YES NO

Your current age \_\_\_\_\_



*(Check all that apply)*

**Have you ever had an adverse reaction to:**

Local Anesthetics/Novocain      Codeine

Antibiotic \_\_\_\_\_

Other \_\_\_\_\_

Aspirin/Advil                      Latex

**Do you take:**

Blood thinners (e.g Coumadin, Plavix, etc.) *if yes*, date and score of most recent INR \_\_\_\_\_

Any other medications, vitamins or supplements, if so, please list:

Name of medication

What condition you take it for

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(List any additional meds you take on separate sheet)*

**What is your level of anxiety/stress/fear when going to the dentist?**    None    Mild    Mod    Severe

**Other Medical conditions**      *(Check all that apply)*

Asthma *if yes*, where do you keep your inhaler? \_\_\_\_\_

Bleeding problems    Epilepsy                      Prosthetic heart valve                      Artificial joint

Hepatitis                      Tuberculosis                      HIV/AIDS                      Thyroid Disease

Cancer                      Chemo/radiation                      Breathing Problems                      Steroid Use

Kidney Problems                      Psychiatric therapy                      Change in health in last year                      Any Addiction

Breathing/COPD                      Vertigo                      Hypertension                      Congestive Heart Failure

**The following risk factors make it much easier for periodontal (gum) disease to develop.**

*Please list all of the risk factors that you have.*

- Current Tobacco user → What kind \_\_\_\_\_ How much/day \_\_\_\_\_ For how long \_\_\_\_\_
- Previous Tobacco user → When did you quit \_\_\_\_\_
- Family history of gum disease (parents lost teeth at early age or gum disease on your side of family)
- Stress (*death of spouse, divorce/separation, death in family, injury/illness, retirement, loss of job, etc.*)
- Previous bouts of gum disease or gingivitis
- Spouse with gum disease (Gum disease may be transmissible, all family members should be screened for gum disease)
- Osteoporosis
- Taking Dilantin, Ca+ Channel Blockers, or Immunosuppressants for organ transplantation
- Diabetes (*additional information requested on back*)
- Overweight (*additional information requested on back*)
- Poor nutrition (*additional information requested on back*)

**Gum Disease – Heart Disease**

Untreated gum disease can increase your risk for heart attack and stroke.

Have you been diagnosed with heart disease/stroke?

- Yes  
 No → Do you have any of these risk factors?  
 Family history of heart disease       Tobacco use  
 High cholesterol                               High blood pressure

**Diabetes**

Diabetics are more prone to gum disease. Left untreated, gum disease makes it harder for diabetics to control their blood sugar. Diabetics who have their gum disease treated can improve their blood sugar control thus making diabetic complications less likely.

Are you diabetic?

- no → Any family history of diabetes?  Yes  No  
 Have any of these warning signs of diabetes?  
 Frequent urination     Excessive thirst/hunger  
 Weakness/fatigue     Slow healing of cuts  
 Unexplained weight loss  
 yes → How is your diabetes control?  Good  Fair  Poor  
 Date of last A1c \_\_\_\_\_ What score? \_\_\_\_\_  
 Who is your diabetes Doctor \_\_\_\_\_

**Obesity**

Being overweight increases your risk for gum disease. Obesity and gum disease are both risk factors for heart disease and diabetes. Thus, if you are over your ideal weight it is vitally important for you to eliminate any gum inflammation to lower your risks for more serious health problems.

We can calculate your weight status by using Body Mass Index (BMI)

List your current weight \_\_\_\_\_

List your current height \_\_\_\_\_

$$BMI = (703 \times \text{weight}) / (\text{height})^2$$

18.4 or below	Underweight
18.5 to 24.9	Healthy weight
25.0 to 29.9	Overweight
≥30.0	Obese

- Do you find it hard to eat a balanced diet?       Yes     No  
 Have you ever had your Vitamin D level checked?  Yes     No

**Rheumatoid Arthritis**

If you have rheumatoid arthritis, emerging research suggests that eliminating any gum disease and then keeping it at bay can lessen the crippling effects of arthritis.

Have you ever been diagnosed with Rheumatoid Arthritis?

- Yes     No

**Alzheimer's Disease**

Research suggests that patients with long standing gum disease may be more likely to develop adverse mental decline as they age.

Do you have a family history of Alzheimer's Disease?

- Yes     No

**FEMALES**

Are you:       Pregnant     Nursing     Taking birth control pills

Are you post-menopausal?     Yes             No

Do you have osteoporosis?

Yes

No → Have you ever been tested for osteoporosis?  Yes     No

Do you have any of the following risk factors for osteoporosis?  Yes     No

*Post-menopausal    Family history of osteoporosis    Early menopause*  
*Rheumatoid Arthritis    Inadequate exercise                      Tobacco use/Smoking*

Ever taken *Fosamax, Fosamax Plus D, Actonel, Boniva, Didronel, Skelid, Aredia, Bonefors, or Zometa* for osteoporosis or for any other reason?  Yes     No