

**HISTORY**

|  |                  |
|--|------------------|
| DATE                                   | CHIEF COMPLAINT: |
| PRESENT ILLNESS:                       |                  |
| CURRENT MEDICATIONS:                   |                  |
| ALLERGIES:                             |                  |
| HABITS (TOBACCO, ALCOHOL, ETC.):       |                  |
| PAST HISTORY:                          |                  |
| FAMILY HISTORY:                        |                  |
| SOCIAL HISTORY:                        |                  |
| <b>REVIEW OF SYSTEMS<br/>(General)</b> |                  |
| HEENT:                                 |                  |
| CARDIORESPIRATORY:                     |                  |
| GASTROINTESTINAL:                      |                  |
| GENITOURINARY:                         |                  |
| NEUROMUSCULAR:                         |                  |

 **DeKalb Medical Center**  
Decatur, Georgia

**HISTORY AND PHYSICAL  
(FRONT)**



3-5611

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