Health History Form

Name:_____

Date:_____

1. **What are you being seen for today?** _____

2. **When did this problem begin?**_____

3. **How did this problem occur?**_____

4. **What is your current pain level today?**

No pain	1	2	3	4	5	6	7	8	9	10	Worst Pain

5. **Please rate your general health:** poor fair good excellent

6. **Please circle all that apply to your current or past medical history:**

Rheumatoid Arthritis	High Blood Pressure	Kidney Disease	Menopausal
Osteoarthritis	Heart Problems	Multiple Sclerosis	Numbness/tingling
Osteoporosis	Stroke	Anemia	Pain at night/rest
History of Fractures	Mental illness	Asthma	Abdominal pulsating mass
Cancer	Depression	Emphysema	Changes in skin color
Diabetes	Tuberculosis	Changes in bowel/bladder	Dizziness/Concussions
Currently pregnant	Implanted device	Hepatitis	Chest Pain
Seizures	Unexplained weight loss	Migraines/Headaches	Persistent fever/chills
Chemical dependency	Fibromyalgia	Smoking	Weakness
Overweight	Thyroid problems	Sleep disorder/apnea	Calf pain, swelling, warmth

Other:_____

7. **Medical allergies:** **Latex** **Adhesive** **Other**_____

8. **Surgeries:**

Cancer_____ Heart_____

Orthopedic_____ Other_____

9. **Medications you are currently taking:**

Cardiac	Thyroid	Sleep	Muscle relaxants	High Blood Pressure
Hormone Replacement	Heparin/Coumadin	Anti-Inflammatory	Steroids	
Anti-Seizure	Bone Density	Pain	Anti-Depressants	

Other_____

10. **Occupation:**_____; **or** None Student Retired

11. **What are your primary job or home tasks?**

Prolonged sitting	Prolonged standing	Lifting/carrying	Repetitive tasks
Operating a Machine/Assembly	Driving	Pushing/Pulling	Computer Work

Other: _____

*Patient Signature:*_____*Date:*_____*Time:*_____

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Insurance	Action
HP	Pre-Auth needed for > 20 visits/year
Humana	Watch appointment notes for authorization
Medicare (primary, 2^0, etc) BCBS Platinum Blue MVA with patient >65 years old	Medicare rules for charging Certification G codes KX modifier if annual Cap exceeded Signed ABN for iontophoresis ATC cannot see
Medicare Replacement	Document time like Medicare Charge like Medicare No G codes or certs needed If Medica Prime Solution, follow Cap rules
MA	Cert needed Charge: Must do 8 min of a code to bill (Normal method) ATC cannot see No G Codes
Self Referred	MD orders needed after 90 days
WK Comp	Must get pre-auth beyond original authorization Do not exceed authorized visits or date range
Not - Medicare (primary, 2^0, etc) BCBS Platinum Blue MVA with patient >65 years old Medicare Replacement	Charge: Must do 8 min of a code to bill (Normal method) Document time for each procedure code
Any insurance	Signed waiver if treating with iontophoresis