



HUMPHREY SHOULDER CLINIC

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C. SCOTT HUMPHREY, MD
Orthopaedic Surgeon

Patient Name _____

Date of Birth _____

Referred by _____ Primary Care MD _____

Single _____ Married _____ Widowed _____ Divorced _____

Name of Spouse/Significant other _____

Dominate hand _____ Right _____ Left _____

Chief complaint _____

Are you currently involved in a lawsuit regarding your injury? If so, who is your representative?

Drug allergies	Reaction	Last occurrence
1 _____		
2 _____		
3 _____		
4 _____		

Are you allergic to any metals? _____ If so, what kind? _____

Reaction? _____

Current medications	Dosage	Frequency
(Please include: over-the-counter medications such as multi-vitamins, aspirin, etc...)		
1 _____		
2 _____		
3 _____		
4 _____		
5 _____		
6 _____		
7 _____		

Prior surgeries	Side (if applies)	Surgeon/Place	Date
1 _____			
2 _____			
3 _____			
4 _____			
5 _____			

Have you ever been treated for the following?

- Polio
- Meningitis
- Pericarditis
- Pancreatitis
- Endocarditis
- Pneumonia
- Hepatitis A
- Hepatitis B
- Hepatitis C

If marked yes to the above, please include the date and how long you were treated.

Constitutional:

- Pain interfering with sleep
- Cancer (specify type in space below)
- Chills or Fever
- Complications from anesthesia
- Recent weight loss

Neurologic:

- Dizziness
- Migraines
- Seizures
- Multiple sclerosis

Eyes:

- Recent vision changes
- Blurry vision

ENT:

- Difficulty swallowing
- Sinus disease
- Hearing loss

Cardiac:

- Hypertension
- Angina
- Myocardio Infarction
- Arrhythmia

Congestive heart failure

Respiratory:

- Asthma
- Chronic Bronchitis
- Cough
- Shortness of breath
- Tuberculosis

GI:

- Gastric Reflux
- Peptic Ulcer Disease
- Vomiting
- Bowel incontinence
- Peptic ulcer disease

GU:

- Urinary frequency
- Urinary hesitancy
- Urgency
- Urinary Hematuria
- Benign Prostate Hypertrophy

Musculoskeletal:

- Previous surgery
- Joint pain
- Joint stiffness
- Muscle pain
- Osteoarthritis
- Rheumatoid arthritis
- Osteopenia
- Osteoporosis
- Bone cancer

Endocrine:

- Diabetes – Type I
- Diabetes – Type II
- Thyroid disease
- Kidney disease

Immunologic:

- Lupus
- Fibromyalgia
- Steroid therapy

Vascular:

- Deep Vein Thrombosis
- Claudication

Skin:

- Psoriasis
- Rashes
- Lesions
- Hives

Lymphatic:

- Lymphadenopathy
- Lymphadenitis
- Breast cancer
- Prostate cancer

Psychiatric:

- Chronic insomnia
- Depression
- Anxiety
- Schizophrenia

Other:

If you are currently being treated for any other medical condition or need to elaborate on a condition marked above, please explain in the space below.
