

McLaren Print System Order

Order No: 55576 Reprint Previous Order No: 5565
Order Date: 2020-07-23
User: Bobbie Morris
Phone: 989-794-4032

Ship Location: McLaren Midland Primary Care
801 Joe Mann Blvd., Ste A
Midland, Michigan 48642

Forms

Quantity: 100
Paragon Dept No: 56056
Dept Name: McLaren Midland Primary Care
Company Number: 810

Order Total Price: 0.00

Item Number: MM-34585
Item Description: Welcome to Medicare Exam
Revision Date: 8/2013
Print: 2 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish:
Drill: None
Misc Info:

McLaren Medical Group
"Welcome to Medicare" Exam
Medicare eligibility info: Date of exam: Sex of patient:
MEDICARE HISTORY
Medicare enrollment or expiration:
Date: Expired?: Drug regimen:
Tobacco use:
Medications, supplements and vitamins: Alcohol use:
Drug use:
Social history notes (including diet and physical activities):
Family history notes:
DEPRESSION SCREEN
1. Over the past two weeks, have you felt down, depressed or hopeless?
2. Over the past two weeks, have you felt little interest or pleasure in doing things?
FUNCTIONAL ABILITY/SAFETY SCREEN
1. Has the patient's vision in 6 or less weeks or longer than 30 weeks?
2. Do you need help with the phone, transportation, shopping, preparing meals, housework, laundry, medications or managing money?
3. Have your feet been sore in the hallway, bed, your feet in the bathroom, bed, handrails on the stairs or back porch (lighting)?
4. Have you trouble walking or climbing stairs?
PHYSICAL EXAMINATION
Height: Weight: Blood pressure:
Head weight: Body Mass Index:
ELECTROCARDIOGRAM
Rational or not:
Pulmonary/olfactory/visual/hearing, vision and hearing:
ADVANCE DIRECTIVE
Printed form: Read and hear: Do not print: Signature writing is below Advance Directive:
"Welcome to Medicare" Exam