

McLaren Print System Order

Order No: 6677
 Order Date: 2014-10-22
 User: Angela DeLaRosa
 Phone: 3720 Katalin Ct, Suite 201 (989) 893-9705

Ship Location: McLaren Bay Region Family Medicine/Attn Angela DeLaRosa
 3720 Katalin Ct
 Bay City, MI 48706

Forms

Quantity: 100
 Paragon Dept No: 60841
 Dept Name: McLaren Medical Group
 Company Number: 810

Order Total Price: 8.76

Item Number: MM-26
 Item Description: ADHD Intake Form
 Revision Date:
 Print: 2 sided black and white
 Paper: 20# White Text
 Size: 8.5 x 11
 Fold:
 Finish: None
 Drill: None
 Misc Info:

McLaren Ambulatory Care Center

ADHD INTAKE FORM

PATIENT NAME: _____
 Date: _____ Likes to be called: _____
 Date of Birth: _____ Current Age: _____ Sex: F M

PURPOSE OF THE VISIT:
 Main Symptom: _____

Length of Time Present: _____
 Present in both home and school: Yes No
 Severity: Mild Moderate Severe

PRIOR EVALUATIONS:

MEDICAL HISTORY:
 Complications of pregnancy: Excessive vomiting Excessive bleeding
 Gestational Diabetes Infection/Torment
 Cigarette use Drug use
 Other: _____

Prenatal History:
 Labor: Spontaneous Induced Duration: _____
 Delivery: Vaginal C-section
 Birth Weight: _____
 Normal cord Dismemberings Injury
 Headset Cytomegalovirus Oxygen
 Other: _____

Current Medical Problems: _____

 Medications: _____

 Prior Medical Problems: _____

Prior Medications: _____
Hospitalizations: _____
Surgeries: _____
Med Allergies: _____

History of:
 Seizures Head injury Eye problems
 Tics Ear problems Asthma
 Bed-wetting Eating disorder Alcoholism
 Sleep issue Middle ear infection Early Ankle
 Nightmares Night terrors Sleep-walking
 Car sickness Headaches Feeding
 Rheumatic fever Chest pain with exercise
 Polydactyls High blood pressure
 Exercise intolerance Heart murmur

FAMILY HISTORY:
 Any family history of the following:
 Sudden or unexpected death in someone young
 "Heart attack" in someone < 35 years of age
 Sudden death during exercise
 Abnormal heart rhythm
 Hypertrophic cardiomyopathy
 Dilated cardiomyopathy
 Long QT syndrome or short QT syndrome
 Wolff-Parkinson-White syndrome
 Resuscitation of family member < 35 years old
 Marfan syndrome

Child is currently living with:
 Natural Mother Stepmother
 Adoptive mother Foster Mother
 Natural Father Stepfather
 Adoptive Father Foster Father

Other Household Members: _____
 Non-residential adults involved with the child on a regular basis: _____
