

SINGER DERMATOLOGY

29355 Northwestern Highway, Suite 302 Southfield, MI. 48034
248-228-2990 phone 248-281-1764 fax
Robert Singer, M.D. Daneen Locke, PA-C. Dana Vered, N.P. Marianne Harbut, PA-C
Amber Roberts, PA-C. Amanda Young, PA-C.

NEW PATIENT HISTORY FORM

Name: _____

Main Reasons for coming to the office: _____

Location of Problem(s): _____

Please briefly describe the problem(s):

Duration of Problem (when did it first start?): _____

Please list any medical conditions you have:

Please list any surgeries or procedures you have had in the past, or any upcoming in the next 3 months:

Please list any skin conditions or skin cancers you have had in the past, along with treatments:

Please do not leave anything blank. If something does not apply, please put N/A.

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Name: _____

Please list any family history of melanoma or any other skin condition:

Please list your medications and supplements (and the month and year you began each one. This is very important. Don't forget OTC products like aspirin, ibuprofen, Tylenol. Also put in any medications you have stopped within the last 6 months). Please let us know the dose and frequency you are taking these!

Are you allergic to any medications? ____ yes / ____ no

If so, please list the date or year you had the reaction and what kind of symptoms you had, such as rash, itching, hives, shortness of breath, nausea, etc.

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Name: _____

Females only (this applies to all females ages 10 and older):

Are you pregnant? ___ yes / ___ no If yes, when are you due: _____

Are you planning a pregnancy? ___ yes / ___ no If yes, explain _____

When is the last date of your period (or last period if menopausal) ___ / ___ / ___

If you are avoiding pregnancy, what method are you using, such as birth control pills, IUD, abstinence, Depo-Provera, condoms, or other: _____

Are you breastfeeding? ___ yes / ___ no If yes, explain _____

Please list the name, address, and phone number of your preferred pharmacy:

THANK YOU FROM SINGER DERMATOLOGY

Please do not leave anything blank. If something does not apply, please put N/A.