



New Patient Application

Choose Provider and Health Center

- Barnesville Family Health Center: Dr. Himalaya Patcha (Patients 18 and older)
Dr. Lauren Wooten
Jodi Gottardi, PA-C
Ryan Aston, PA-C
Miles Jefferis, FNP-BC
Freeport Family Health Center: Dr. Lauren Wooten
Ryan Aston, PA-C
Caldwell Family Health Center: Dr. Holly Overmiller
Monroe Family Health Center: Dr. Holly Overmiller
Dr. Ronnie Williamson
Natasha Kline, PA-C
Kaitlin Miller, PA-C
Quaker City Family Health Center: Staci Fellows, NP-C
Barnesville Family Dental Center: Dr. David Mayberry, DDS
Freeport Family Dental Center: Dr. Amber Bauer-Doyle, DDS

NAME: _____ DATE: _____

PHONE NUMBER: _____ DOB: _____ AGE: _____

ADDRESS: _____

PREVIOUS DOCTOR: _____

REASON FOR LEAVING THAT DOCTOR: _____

PHARMACY: _____

NAME OF INSURANCE: _____

ANY WORKERS COMPENSATION CLAIM? _____

Table with 2 columns: MEDICAL HISTORY and SELECT ONE. Rows include BACK INJURY/PAIN, HYPERTENSION (HIGH BLOOD PRESSURE), DIABETIC (HIGH BLOOD SUGAR), HYPERLIPIDEMIA (HIGH CHOLESTROL OR HIGH TRIGLYCERIDE), HEART PROBLEMS, LUNG PROBLEMS, THYROID PROBLEMS, and CANCER.

LOCATION _____

TREATMENT _____

WHEN DIAGNOSED _____

SURGICAL HISTORY:

ADDITIONAL HEALTH PROBLEMS:

MEDICATIONS AND REASON FOR THE MEDICATIONS (IF KNOWN):
