

Edward M. Kramer, M.D, 27995 Greenfield Drive #C Laguna Niguel, CA 92677

Patient Name: _____

DOB: _____

Account #: _____

Gender: _____

History:

Allergies to medications:

Major problems: Heart _____

High blood pressure _____ Asthma or other respiratory problems _____

Other major problems or illnesses: _____

Is there a family history of skin cancer? _____ or melanoma? _____

Or other major illnesses? _____

Have you ever had skin cancer? _____

List all current medications and topical creams you are using:

Have you ever fainted or been lightheaded when having an injection or surgical procedure?

Do you take antibiotics prior to dental procedures or surgery?
