

**Medical Information**

Date:

Nels Ewoldsen DDS 101 N. Cross St Waveland, IN 7989

Do you have any problems with healing? Healing problems can include prolonged bleeding, infection, problems with pain management, long recovery time following illness or injury.

Are you allergic to any medications or medical products including anesthetics, antibiotics, latex?

Are you receiving ongoing medical treatments or are you under a physician's care at this time? For instance are you diabetic, epileptic, or do you suffer from a chronic condition/illness?

Do you consider yourself healthy? Has your doctor suggested you limit or refrain from certain activities or advised you to take antibiotics prior to dental appointments?

Name of family physician: \_\_\_\_\_

**Dental History**

Do your jaws ache?

Are your teeth sensitive?

Can you eat/chew most foods?

Do you worry about bad breath?

Do you feel confident when you smile?

Have you ever had a bad dental experience?

When did you last visit a dentist for examination and radiographs (x-rays)?