HILTON HEAD DERMATOLOGY & SKIN CANCER CENTER, P.A. LASER & SKIN SURGER CENTER

Certified, American Board of Dermatology Certified, American Board of Mohs Micrographic Surgery and Cutaneous Oncology

A. Thomas Bundy, MD, FAAD, FACMS Emily K. Murphy, FNP-C Meghan M. Campbell, MS, PA-C Becca Dugal, DNP, FNP-C Lauren Remegi, MS, PA_C



Cosmetic Laser Surgery
Diseases of the Skin, Hair, & Nails
Dermatologic Reconstructive Surgery
Mohs Micrographic Skin Cancer Surgery

MEDICAL HISTORY

Patient:		Age	Sex	Weight	Date:	
Allergies to any medications, dental anesthesia, epinephrine? ☐ Yes ☐ No If yes , list:						
Do you have an Advance Directive? ☐ Yes ☐ No If yes , please provide a copy						
HISTORY PERSONAL I			IEW OF SYSTE		COSMETIC INTE	
Asthma	Yes No	Fatigue, Malai Visual, Hearing Bleed a lot, + I Chest pain, Co Heart: Abnorm Pacemaker, De Joint Pain/Swe Artificial Joint Poor wound he Seizure, Stroke Depression, M	a, Dysuria se g Difficulty Lymph nodes ugh al Rhythm efibrillator elling / Heart valve ealing, Thick Scars	⊔ ⊔	Any interest in Botox Fillers Freshening Peels Facials IPL Photo facial Laser Rejuvenation Laser Vein Treatment Laser Resurfacing Laser Hair Removal Microdermabrasion Microneedling Skin Care Products Tattoo Removal Waxing	
Social and MIPS History: Are you pregnant, planning a pregnancy or breast-feeding? □ Yes □ No □ Yes, packs per day Do you smoke? □ Yes □ No If Yes, drinks per day Do you drink alcohol? □ Yes □ No October-December □ Yes □ No Have you ever had the flu vaccine Jan-March □ Yes □ No October-December □ Yes □ No Have you ever had a pneumococcal vaccine □ Yes □ No						
Skin History: Have you ever had skin cancer? Are there any untreated skin cancer. Has anyone in your family had sk Do you have a history of any skin. Is there a family history of skin d When you are exposed to sun, do	cers? kin cancer? diseases?	☐ Yes ☐ Yes	 No If No If No If No If 	f Yes, list: f Yes, list: f Yes, list: f Yes, list:		
Please answer the following:	you.	- run omy	— Tun una oun	. L Buin		
How did you hear about us? What pharmacy do you use?	re:					
Internist or family physician: Nan	ne	Street	City		Zip code	