



Nibha Mediratta, MD PL

1970 Hospital View Way

Unit 1

Clermont, FL 34711

Phone: 352-243-1101

Fax: 352-243-1134

www.nmediratta.com

New Patient Medical History – Please complete this form prior to scheduling your first appointment

Demographics	
Name:	
Address:	
Phone Number:	
Date of Birth:	
Age:	
Sex:	

Allergies (Food/Drug) or Intolerances	
Allergy/Intolerance to:	Reaction:
<i>Example: Lisinopril</i>	<i>Cough</i>

Past Medical History	
Condition/Disease:	Year Began:
<i>Example: Diabetes</i>	<i>2007</i>

Medications, Vitamins & Herbal Supplements		
Medication:	Strength :	Frequency :
<i>Example: Tylenol</i>	<i>500 mg</i>	<i>1 tablet twice a day</i>

Surgical History/Hospitalizations/Serious Injuries	
Operation/Hospitalization/Injury	Month/Year
<i>Example: Right Knee Replacement</i>	<i>March 2012</i>

Specialists		
Physician Name:	Specialty:	Phone Number:
<i>Dr. Ken Good</i>	<i>Cardiologist</i>	<i>352-222-1111</i>

Previous Primary Care Physician: _____ Phone #: _____ Fax #: _____
 Primary Insurance: _____ Secondary Insurance: _____