Conor W. O'Neill, M.D.

Diagnosis and non-surgical treatment of spine disorders, including diagnostic and therapeutic injections and interventional pain management

General Health Questionnaire

Understanding your general health will help us to treat your spine problem. Please complete the following as best as possible.

1. Name: _____ 2. Preferred Name: _____

3. DOB: _____ 4. Age: _____ 5. Gender: ☐M ☐F 6. Ht: _____ 7.Wt: _____

8. Physician who referred you: _____

9. Primary care physician: _____

10. List any surgeries you have had (include approximate dates): _____

_____

_____

11. List any other hospitalizations (include approximate dates): _____

_____

_____

12. Please list your medications

	Medication	Dosage/Frequency		Medication	Dosage/Frequency
1			14		
2			15		
3			16		
4			17		
5			18		
6			19		
7			20		
8			21		
9			22		
10			23		
11			24		
12			25		
13			26		

2100 WEBSTER ST, SUITE 518 • SAN FRANCISCO, CA, 94115
Tel: (415) 600.7830 • Toll Free: (888) 600.7831 • Fax: (415) 600.7835

13. Have you ever been diagnosed with any of the following?

Y	N			Y	N		
☐	☐	Diabetes		☐	☐	Gastric reflux	
☐	☐	High Blood Pressure		☐	☐	Gastritis or ulcers	
☐	☐	Angina		☐	☐	Liver Disease	Describe: _____
☐	☐	Heart attack	Date: _____			_____	
☐	☐	Stent	Date: _____	☐	☐	Kidney Disease	Describe: _____
☐	☐	Angioplasty	Date: _____			_____	
☐	☐	Irregular heart beat	Describe: _____	☐	☐	Cancer	Describe: _____
		_____				_____	
☐	☐	Pacemaker	Date: _____	☐	☐	Problems with anesthesia	Describe: _____
☐	☐	Defibrillator	Date: _____			_____	
☐	☐	Heart valve problems	Describe: _____	☐	☐	Allergy to penicllin	Describe: _____
		_____				_____	
☐	☐	Heart Failure		☐	☐	Allergy to Keflex/Ancef	Describe: _____
☐	☐	Hardening of the arteries	Describe: _____			_____	
		_____		☐	☐	Allergy to contrast dye	Describe: _____
☐	☐	Stroke	Date: _____			_____	
☐	☐	TIA	Date: _____	☐	☐	Allergy to iodine	Describe: _____
☐	☐	Blood clots				_____	
☐	☐	Asthma		☐	☐	Allergy to tape or latex	Describe: _____
☐	☐	Emphysema				_____	
☐	☐	Sleep apnea		☐	☐	Other medication allergies	Describe: _____
						_____	

14. List any other medical problems you think we should be aware of. _____

_____

_____