

# Patient Profile/Application

Georgian Nurse Practitioner-Led Clinic  
 M139-1 Georgian Dr,  
 Sadlon Health & Wellness Building,  
 Barrie ON. L4M 3X9,  
 ph.722.1581, fax 722.1583

**Apply NOW!**  
**Mail/deliver/fax back completed form**

This section must be filled in completely to be added to our wait list

How did you hear about the Clinic: \_\_\_\_\_  
 Patient Name: \_\_\_\_\_  
 OHIP number \_\_\_\_\_ exp \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_  
 Do we have permission to call? \_\_\_\_\_ Permission to leave message? \_\_\_\_\_  
 Allergies: \_\_\_\_\_  
 \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_  
 Name/City of regular nurse practitioner or MD: \_\_\_\_\_  
 Do you currently have a MD or NP \_\_\_\_\_  
 Emergency Contact: \_\_\_\_\_

## Risk Factors

Personal or Family Illness History?	Personal	Familial
Heart Disease / Stroke		
Lung Disease / Tobacco Exposure		
Cancers / Blood / Organ Diseases		
Mental Health Issues		
Other		

## Problem List: Chronic

Entry Date	Description: Ongoing / Chronic Problem	Date Begun

## Problem List: Acute

Entry Date	Description: New / Acute Problem	Date Begun	Date Ended

## Referrals

Specialist	Reason / Problem	Date of Referral	Report Received

## MEDICATIONS LIST

**Include prescriptions, over the counter meds, herbal & other**

	Date Begun	Date Ended