



The Next Level Sports Medicine
James J. Lohse MD FAAFP CAQSM
4095 Mallory Lane
Franklin TN 37067
Tel: 615-850-5290
Fax: 615-777-3702
www.thenextlevelsportsmedicine.com

Patient Information:

Patient Name: _____ DOB: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Marital Status: Single Married Divorced Widowed

Cell Phone: _____ Work Phone: _____

Email: _____

Sex: _____

Employer: _____

Guarantor if under 18 (who is insurance under?):

Name: _____ Date of Birth: _____

Social Security# _____ Sex: _____

Marital Status: Single Married Divorced Widowed

Address: _____

City: _____ State: _____ Zip Code: _____

Cell Phone: _____ Work Phone: _____

Email: _____

Employer: _____

EMERGENCY CONTACT (name & number): _____



The Next Level Sports Medicine

James J. Lohse MD FAAFP CAQSM

4095 Mallory Lane

Franklin TN 37067

Tel: 615-850-5290

Fax: 615-777-3702

www.thenextlevelsportsmedicine.com

Patient Medical History Form

(Front and Back)

Name: _____ Date of Birth: _____

Referring Physician: _____

Pharmacy Name: _____ Street: _____

Where is the Pain/Injury? _____

How long have you had symptoms: _____ How severe is your pain(1-10)? _____

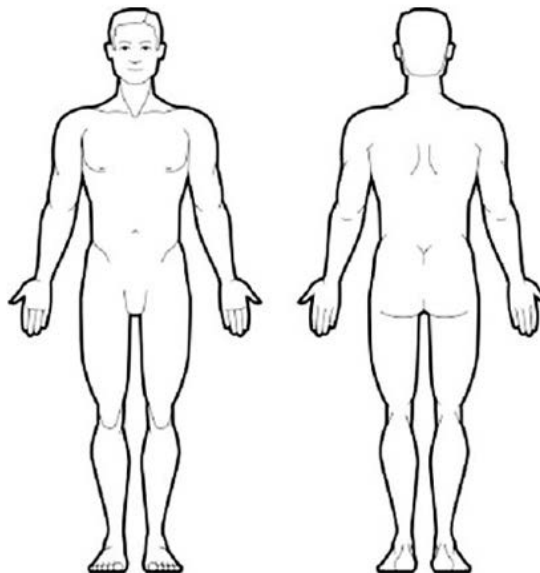
Circle appropriate description:

Sharp/Stabbing Dull Ache Numbness/Tingling/Burning Throbbing

When does your pain occur/feel worse? _____

What makes pain feel better? _____

Circle where pain is located:



Past Medical History (please circle)

• Asthma	• Heart Attack	• Rheumatoid Arthritis
• Cancer	• Hypertension	• Skin Disease
• Depression/Anxiety	• High Cholesterol	• Stroke
• Diabetes	• Osteoporosis	• Thyroid
• Lung Problems	• Epilepsy	• Ulcers
• Kidney Problems	• Gout	• Prostate

Past Surgical History (List all Previous Surgical Procedures):

Medications:

Allergies (List the Names of Drug Allergies):

--	--	--

Family Medical History (List Family Members with the Following Conditions):

Arthritis	
Bleeding Condition	
Cancer	
Diabetes	
Heart Disease	
Osteoporosis	
Scoliosis	
Stroke	

Tobacco: YES ____ NO ____ **Alcohol:** YES ____ NO ____