



Houma Outpatient Surgery Center, AAAHC ACCREDITED

3717 Houma Blvd, 3rd Floor
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Houma Outpatient Surgery.com

Pre-Op History & Physical Examination

History

Patient Name:	DOS:
Chief Complaint:	
Present Illness:	
Medical History:	Smoking History:
	Alcohol History:
	Allergies:
Surgical History:	
Current Meds and Doses:	

Review of Systems

CV:	MS:
Resp:	Neuro:
GI:	GU:
Other:	

Examination

B.P:	Pulse:	Resp:	Temp:	Ht.	Wt.
General Appearance:					
Head-Eyes, Ears, Nose, Throat:					
Heart:					
Lungs:					
Abdomen:					
Adenopathy:					
Extremities:					
Site-Specific Exam:					

Signed: _____

Date: _____