

NEW MEDICAL PATIENT AT PREMIER AESTHETICS

Welcome to Premier Aesthetics! We are so happy to have you. Due to recent guidelines we are conducting our consults virtually. Please include photos of your areas of concern(s) (if able) and fill out the medical history below prior to your virtual consultation.

PATIENT NAME: _____

DATE OF BIRTH: _____

DATE: _____

EMAIL: _____

PHONE NUMBER: _____

HOME ADDRESS: _____

CITY, STATE: _____

HOW DID YOU HEAR ABOUT US?

- Facebook
- Instagram
- TikTok
- Radio
- TV
- Friend/Family: _____

MEDICAL HISTORY:

- NONE
- Anxiety
- Arthritis
- Asthma
- Atrial Fibrillation (irregulat heartbeat)
- Bone Marrow Transplantation
- Depression
- Diabetes
- Heart Disease/Cardiac Condition
- Hepatitis
- HIV/AIDS
- Hirsutism
- Hypertension (high blood pressure)
- Hyperthyroidism
- Seizures
- PCOS
- Shingles
- Stroke
- Cancers other than skin: _____
- Other: _____

PAST SURGERIES:

- NONE
- Or list all past surgeries

MEDICATIONS:

- NONE
- Or list all medications

ALLERGIES:

- NONE
- Or list all known allergies

SKIN DISEASE HISTORY

SKIN CANCERS:

- NONE
- Basal Cell Carcinoma
- Melanoma
- Precancerous Moles
- Squamous Cell Carcinoma
- Additional skin infections or allergies:

SKIN CONDITIONS:

- Acne
- Cold Sores/Fever Blisters
- Dry Skin
- Eczema
- Psoriasis
- Rosacea
- Vitiligo
- Other: _____

SOCIAL HISTORY

TOBACCO USAGE:

- Never
- Former
- Current, number of times per day: _____

ALCOHOL USAGE:

- Never
- Weekly
- Daily
- Number per day: _____

OTHER MEDICAL CONDITIONS: SELECT ALL THAT APPLY

- NONE
- Bleeding Disorder
- Blood Thinners
- Breast Feeding
- History of tanning bed usage
- Hyperhidrosis
- Hyperpigmentation
- Hypopigmentation
- Immunosuppression
- Isotretinoin (Accutane)
- Kidney Disease
- Menopausal (1st 12 months)
- Metal or other implants
- Organ Transplant
- Pregnancy or planning pregnancy
- Problems scarring
- Rapid Heartbeat
- Thyroid Problems
- Other: _____

ADDITIONAL QUESTIONS

WHICH OF THE FOLLOWING CONCERNS DO YOU HAVE ABOUT YOUR SKIN/BODY?

- Acne
- Age Spots
- Aged Skin
- Dry Skin
- Enlarged Pores
- Hair Removal
- Leg Veins
- Melasma
- Oily Skin
- Pigment Changes
- Redness
- Rosacea
- Scars
- Skin Laxity
- Skin Texture
- Sun Damage
- Uneven Skin Color
- Whiteheads/Blackheads
- Wrinkles
- Other: _____