Ahad MD PC | Medical intake

1380 Coolidge Highway, Suite 250, Troy, MI 48084 | 248-288-9300

List what you know. Write "none" or "not sure" if needed. Attach an extra page or medication list.

Full name

Date of birth

Date

Surgical history

Procedure and approximate year; or none.

Medical history

Past or current medical conditions; or none.

Allergies

Medication, food or other allergy and reaction; or none / not sure.

Medication list

Name, dose and how often taken. Include vitamins and supplements; or attach a list.

Type in a PDF reader, save, then print and bring to your visit. This form does not submit online.

Patient registration and office policies are separate. Bring extra pages if your entries do not fit.