

Post-Operative Patient Health Data

The Johns Hopkins Center for Bariatric Surgery

v. 2.1 (1/14/2009)

1 General Information

Patient Name

Surgeon

Dr. Lidor

Dr. Schweitzer

Visit Date

Dr. Magnuson

Dr. Steele

Primary Care Physician (PCP)

PCP Address, Phone, and Fax

2 Physical Exam - PATIENTS: LEAVE THIS SECTION BLANK AND SKIP TO SECTION 3

Height

 inches

Weight

 lbs

Temperature

 °F

Waist Circum.

 inches

Hip Circum.

 inches

Respirations

Heart rate

Blood Pressure

 /

Large Cuff

Small Cuff

3 Medications

Below, please list all medications that you take now, plus the purpose and the dosage.
Include over the counter medications, herbal supplements, and birth control medications.

Medication

Purpose

Dosage

Blood thinner (please list):

Actigall/Ursodiol

Multivitamin

Calcium

Calcium with Vitamin D

Iron

Vitamin B-12

Vitamin D

Vitamin A, D, E Combo

4 Social History

Please answer the questions below for your current activity, post-surgery.

Tobacco Use

- None
- Rare (social use)
- Occasional (1x/week)
- Frequent

Substance Abuse

- None
- Rare
- Occasional
- Frequent

Alcohol Use

- None
- Rare
- Occasional
- Frequent
- Binge drinking

Support Group Attendance

- None
- Average of one per month
- Average of one per year

5 Health Conditions

What health conditions did you have before surgery?

Some examples might include high blood pressure, GERD, diabetes, high cholesterol, sleep apnea, arthritis or joint/back pain, difficulty walking, asthma, gout, liver disease, urinary incontinence, menstrual problems, headaches, rashes, or psychological issues.

What is the status of these conditions today?

Please be specific and include changes in: medication types, medication dosages, amount of pain or discomfort, severity of condition, frequency of occurrence, etc. If a condition has not changed, let us know that, too.

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