



Welcome

J. Robert Donnelly, D.D.S.
Master of the Academy of General Dentistry
SANMARCOSDENTAL.COM

Date: _____

Last Name: _____ First Name: _____ Preferred Name: _____

Address: _____ Apt. #: _____ City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Birthday: _____ Social Security #: _____

Gender: _____ School: _____ Grade: _____

Personal Physician: _____ Phone #: (____) _____ Last Visit: _____

Current health: () Excellent () Good () Poor

Please list any medications that your child is currently taking: _____

Circle all of following conditions that you have ever been treated for:

Heart Attack	Stroke	Heart Murmur	Rheumatic fever	Anemia	Kidney Problems
Hepatitis	Jaundice	High Blood Press	Low Blood Press	Diabetes	Chemotherapy
Abnormal Bleeding	Fainting	Epilepsy/Seizures	AIDS/HIV	Cancer	Mitro Valve Prolapse
Psychiatric Problems		Tuberculosis			

Please list any other serious medical problems your child has had in the last 5 yrs? _____

Have you ever been told that your child needs antibiotics prior to dental treatment? () No () Yes () Don't Know

Is your child allergic to any medication? () No () Yes – If yes please list: _____

Would you like your child to be sedated for your dental treatment? () No () Yes

In case of an emergency is there anyone we can call? Name: _____ Phone #: _____

Name of person responsible for your account: _____ Relationship to child: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone #: (____) _____ Work phone #: (____) _____ Employer: _____

Social Security #: _____ Date of Birth: ____/____/____ Marital Status: _____

Who can we thank for referring you to our office? _____

Mother's Name: _____ SS # _____/_____/____ DOB ____/____/____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone #: (____) _____ Work Phone #: (____) _____ Employer: _____

Fathers Name: _____ SS #: _____/_____/____ DOB: ____/____/____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone #: (____) _____ Work Phone #: (____) _____ Employer: _____

Please complete BOTH sides →