OTTAWA PLASTIC SURGERY

Confidential Patient Registration Form

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PATIENT INFORMATION

Last Name		First		M.I.	Date	
Street Address				Unit #		
City		Province		Postal Code		
Phone (Home)		E-mail Address				
(Cell)		(Work)				
Health Card Number						
Profession						

Your preferred contact method:	Home ☐	Cell ☐	Work ☐	E-mail ☐	Other ☐
Would you like to be notified by email of any upcoming exclusive offers, promotions, new procedures or treatment care?	YES ☐	NO ☐			
Date of Birth	MM/	DD/	YEAR/		
Family Physician:		Would you like your family physician notified of this appointment? YES ☐ NO ☐			

Have you met with other plastic surgeons? YES ☐ NO ☐
If yes, please indicate who you have met with: _____

How did you hear about Ottawa Plastic Surgery?

☐ Internet	☐ Doctor: _____
☐ Website	☐ Friend: _____
☐ Facebook	☐ Family: _____
☐ RateMD	☐ Patient: _____
☐ RealSelf	☐ Other: _____
☐ Word of Mouth	

Have you visited www.ottawaplasticsurgery.com ? YES ☐ NO ☐

MEDICAL HISTORY

Head and Neck	☐ Migraines	☐ Glaucoma
	☐ Seizures	☐ Thyroid
	☐ Dry Eyes	☐ Other: _____
Heart	☐ Angina	☐ High Blood Pressure
	☐ Heart Failure	☐ Valve Problems
	☐ Heart Attack	☐ Other: _____
Respiratory	☐ Asthma	☐ Smoking
	☐ Pneumonia	☐ Other: _____
Abdomen	☐ Reflux	☐ Digestion
	☐ Ulcers	☐ Other: _____

Patient Name: _____

Gynecology	☐ Breast Lumps / Biopsy ☐ Breast Cancer	☐ Ovarian Growths ☐ Uterine Growths ☐ Other: _____
Musculo Skeletal	☐ Arthritis ☐ Bone / Joint Injuries	☐ Other: _____
Please list all previous surgeries:		
Medications:		
Allergies / Reactions:		

PROCEDURES OF INTEREST

Breast Enhancement	☐ Enlargement ☐ Lifting ☐ Increased Shape	☐ Increased Firmness ☐ Increased Symmetry ☐ Other: _____
Liposuction	☐ Abdomen ☐ Arms ☐ Buttocks ☐ Chest ☐ Flanks / Back	☐ Hips ☐ Knees ☐ Neck ☐ Saddlebags ☐ Thighs ☐ Other: _____
Facial	☐ Eyelids ☐ Neck ☐ Facelift	☐ Sagging ☐ Wrinkles ☐ Other: _____
Abdomen	☐ Abdominoplasty / Tummy Tuck ☐ Liposuction	☐ Contouring ☐ Repair of Scars / Stretch Marks ☐ Other: _____
OTHER:		

NON-SURGICAL PROCEDURES

☐ BOTOX Cosmetic ®	☐ Skin Care Products
☐ Juvederm ®	☐ Lip Enhancement
☐ Dermal Fillers	☐ Refresh Eye Area
☐ Improving Skin Tone / Texture	☐ Maintaining a Youthful Appearance
☐ Laser Treatments (Hair Removal, Skin Rejuvenation)	☐ Thighs
	☐ Other: _____

Ottawa Plastic Surgery is always striving to deliver the best possible patient care. Where would you prefer to be seen for your appointments?