# A. JOSHUA ZIMM M.D., P.C. FACIAL PLASTIC & RECONSTRUCTIVE SURGERY

Name	Date	of Birth	Age
Address	City	State	Zip
Home Phone	Cell Phone		Sex M F
Email			
Would you like to recieve our exclusive web offers a	nd/or private event invita	ations? Yes _	No
Marital Status married single widowed	divorced		
Employer's Name	Work Phone		
Address	City	State	Zip
Allergies to medicine			
Primary Care Doctor	Address		
Referring Physician	Phone Number		
Name of Pharmacy	Phone Number		
Parent/Guardia	n/ Spouse Information		
Name	[	Date of Birth	
Address	City	State	Zip
Phone Work Phone _			
Emergency C	ontact Information		
Name	F	Relationship	
Address	City	State	Zip
Phone Work Phone			
Please note that there is a \$75 fee for all appointme	ents cancelled with less th	an 24 hours of r	notice.
I	, understand that paym	ent is due at the	e time of service.
Patient, Parent, or Guardian Signature (if child is un	_ der 18 years old) Date	2	

50 East 72<sup>nd</sup> Street, 1A, New York, New York 10021 | Phone 212-327-4600 | Fax 917-591-5459 | drjoshuazimm.com

Name			Date	
Reason for today's visit				
1. Have you suffered from?	Yes	No	8. What medications do you use?	
Heart Disease	105	NO		
High Blood Pressure				
Heart Attack			9. Family History of Medical Conditions	
Emphysema				
Asthma			Asthma Heart Cancer High Blood Pressure	
Blood Disease			Diabetes Stroke	
Kidney Disease Glaucoma			Emphysema Other:	
			10 Hove you ever been been italized? V	
Anemia Diabetes			10. Have you ever been hospitalized? Y N	
			Please describe	
Jaundice/Hepatitis				
Cancer			11 However had competing warman? V	
Anxiety			11. Have you had cosmetic surgery?YN	
Depression			Please describe	
Easy Bruising				
Facial Trauma				
Dry Eyes			12 House way had any other summary 2 V N	
Eating Disorder Elaborate as needed			12. Have you had any other surgery?YN Please describe	
2. Do you take?				
St. John's Wort			13. Have you ever had any of the following habits?	
Aspirin			SmokingYN Frequency	
Ginko			Alcohol Y N Frequency	
Vitamin E			Recreational Drugs Y N Frequency	
3. Have you ever taken?			14. Do you have any caps, crowns, bridges, or loose	
Fen Fen			teeth?	
Accutaine				
4. What medication(s) are you a	allergic to?		15. Are you currently undergoing any dental work?	
5. Do you have any other medical problems?		ns?	16. History of cold sores?YN Last outbreak:	
6. Any other psychiatric history?			17. How did you hear of our office? Google Twitter Yahoo Facebook Yelp Realself	
7. Are you pregnant?Y			MSN/Bing Other website Friend/Family Physican	

### A. JOSHUA ZIMM M.D., P.C. FACIAL PLASTIC & RECONSTRUCTIVE SURGERY

#### Please check any areas of concern or interest

- \_\_\_\_ Fine lines and wrinkles
- \_\_\_\_ Deep lines, furrows, sagging of face and neck
- \_\_\_\_ Eye bags
- \_\_\_\_ Double chin and neck fullness
- \_\_\_\_\_ Brown spots, red spots, freckles, or discoloration
- \_\_\_\_ Thin lips/lip lines
- \_\_\_\_ Excessive sweating
- \_\_\_\_ Dark circles or puffiness around eyes
- \_\_\_\_ Scars, including surgical scars
- \_\_\_\_ Shape and/or size of nose
- \_\_\_\_ Drooping eyelids
- \_\_\_\_ Loss of volume in the face
- \_\_\_\_ Frown lines between the eyes
- \_\_\_\_ Defintion of jaw, smoother neck, and cheek contour
- \_\_\_\_ Décolleté (lower neck and chest) wrinkles
- \_\_\_\_ Small or retruded chin
- \_\_\_\_ Eyelashes: sparse, short

#### Additional Concerns:

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FACIAL PLASTIC & RECONSTRUCTIVE SURGERY

Email is one of several options available for doctor-patient communication. The main advantage of email is convenience. The main disadvantages are a potentially slow response time and a potential lack of privacy. Accordingly, email should not be used for communication of sensitive or private information or matters that require prompt attention.

Patients of A. Joshua Zimm, M.D., P.C. have the option of communicating with Dr. Zimm or the office staff by email. Prior to doing this, you need to read through this policy sheet carefully and sign it below. First of all, **you must always include your full name and date of birth in any email messages.** 

Occasionally, emails are not received due to spam filters and other computer and internet issues. Accordingly, if you do not receive a response to your email, please call the office. It generally takes 1-2 business days for Dr. Zimm to answer emails. If this is too long for you to wait for an answer, then please call the office at 212-327-4600. If Dr. Zimm's response will take longer than normal due to something like being away at a conference, the automatic notice will let you know.

Email is only appropriate for certain types of doctor-patient communication. Specifically, email is useful for fairly simple, non-urgent questions. For example, an appropriate email question is asking if an over the counter medicine is okay to take with your prescription medications so long as you do not require an immediate response. Email may also be used to request a routine medication refill. **Under no circumstances should email be used if the matter is urgent or is an emergency**. If the matter is urgent or an emergency exists, please call the office or 911 or seek medical attention at a hospital emergency room.

Dr. Zimm and his staff have the exclusive right to decide what is and is not appropriate for e mail. If Dr. Zimm decides that your question is not appropriate for email, you will be informed. This will generally be by email but may be by phone or some other method.

Dr. Zimm is generally the only one who will read emails sent to his email address. Sometimes, however, other members of the office staff may become involved in answering your question. Only the staff of Dr. Zimm will be reading messages sent to the "<u>info@drjoshuazimm.com</u>" email address. For example, Dr. Zimm may ask one of the other staff members to look up some information to help answer your question.

Email messages travel through the internet. This means that the message is passed along a series of computers. This is not secure and it is possible for someone to read the email as it passes between computers. This is unlikely, but it is possible. Do not put anything into an email that you feel must remain confidential between you and your doctor. Email to and from Dr. Zimm is not encrypted.

If you have any questions about these policies, please ask Dr. Zimm or an office staff member. If you feel that you understand all of these policies and you would like to add email to the ways

you communicate with Dr. Zimm, then sign and date below and return this form to the office.

Name \_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_\_

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