



HVMG- Cardiovascular and Thoracic Surgery
Heritage Valley Beaver
1000 Dutch Ridge Road- Beaver, PA 15009
724-773-8289- phone

Medical History

Weight: _____

Height: _____

Please list any previous surgeries:

Dialysis Patients:

Location of Dialysis: _____

Days of the week: (Circle all the apply) M T W TH F S

Have you had any previous vein surgeries? _____

Do you have any allergies? (Medications, latex, foods, etc) _____

Please list any medications; including over the counter vitamins and herbal supplements you are presently taking. **If you have a current medication list that you carry with you, we will be happy to make a copy for our files.**

Medication	Dose
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Signature: _____

Date: _____