



Patient Label

Patient Name _____ Date of Birth _____

Date of last physical examination _____

Any medical issues or allergies?

For **women only**: Date last menstrual period? _____ Birth control method? _____

Are you currently pregnant or suspect you may be? Yes No Are you planning a pregnancy? Yes No

How many times have you been pregnant? _____ How many live births? _____

List **ALL** current medications, over-the-counter medications and/or supplements: (use other side if needed)

MEDICATION	DOSE	Est Start Date

Please circle any psychiatric medications you have taken in the past:

Depression/Anxiety Medications:

Prozac (fluoxetine)	Zoloft (sertraline)	Paxil (paroxetine)	Luvox (fluvoxamine)
Celexa (citalopram)	Lexapro (escitalopram)	Viibryd (vilazidone)	Brintellix/Trintellix (vortioxetine)
Wellbutrin (bupropion)	Remeron (mirtazapine)	Deplin	Fetzima (levomilnacipran)
Effexor (venlafaxine)	Pristiq (desvenlafaxine)	Cymbalta (duloxetine)	Serzone (nefazodone)
Elavil (amitriptyline)	Pamelor (nortriptyline)	Tofranil (imipramine)	Anafranil (clomipramine)
Parnate (tranylcypromine)	Nardil (phenelzine)	Emsam (selegiline)	desipramine
Buspar (buspirone)	Vistaril (hydroxyzine)	Indural (Propranolol)	Tranxene (clorazepate)
Xanax (alprazolam)	Ativan (lorazepam)	Klonopin (clonazepam)	Valium (diazepam)

Mood Stabilizers/Antipsychotic Medications:

Tegretol (carbamazepine)	Trileptal (oxcarbazepine)	Depakote (valproate)	Lithium
Lamictal (lamotrigine)	Topamax (topiramate)	Neurontin (gabapentin)	Lyrica (pregabalin)
Seroquel (quetiapine)	Zyprexa (olanzapine)	Saphris (asenapine)	Clozaril (clozapine)
Abilify (aripiprazole)	Rexulti (brexpiprazole)	Risperdal (risperidone)	Invega (paliperidone)
Latuda (lurasidone)	Geodon (ziprasidone)	Fanapt (iloperidone)	Haldol (haloperidone)
Thorazine (chlorpromazine)	Prolixin (fluphenazine)	Trilafon (perphenazine)	

Sedatives:

trazodone (Desyrel)	Rozerem (ramelteon)	Restoril (temazepam)	Chloral hydrate
Ambien (zolpidem)	Lunesta (eszopiclone)	Belsomra	

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ADHD/Dementia/Other Medications:

Strattera (atomoxetine)	Artane (trihexylphenidyl)	Adderall/XR	Nuedexta
Intuniv (guanfacine)	Provigil (modafinil)	Nuvigil (armodafinil)	Chantix
Aricept (donepezil)	Exelon (rivastigmine)	Razadyne (galantamine)	amantadine
Namzaric (donepezil/namenda)		Cogentin (benztropine)	Vyvanse
Namenda (memantine)	Ritalin/Concerta/Focalin/Datrana (methylphenidate)		

Personal and Family Medical History Checklist

	You	Family	Which Family Member(s)
Thyroid Disease			
Anemia			
Heart Disease			
Liver Disease			
Kidney Disease			
Diabetes			
Fibromyalgia			
Chronic Fatigue			
Chronic Pain			
High Cholesterol			
High Blood Pressure			
Head Trauma/Loss of consciousness/Seizures			
Cancer			
Asthma			
Other Respiratory Issues			
Stomach/Intestinal Issues			
Reproductive Issues			
Surgeries			
Other medical problems			