



P: 212.371.8460  
F: 212.537.7303

*Lenox Hill Pain Innovation & Research Center*  
30 Central Park South (at Fifth Avenue)  
New York, New York, 10019

**Karan Johar, M.D.**  
**Furqan Tejani, M.D.**  
**Pierre Alex Casthely, M.D.**  
**Rene Hilderbrand, MSPAS, D.O.**  
**Roy Berenholtz, M.D.**  
**Julissa Cruz, M.D.**  
**Julia Zaitsev, R.N.**

*Greenwich Village Pain Institute & Surgery Pavilion*  
95 University Place (at 12<sup>th</sup> Street)  
New York, New York, 10003

*New York Joint and Bone – Orthopedic Sports Medicine Urgent Care*  
41 East 11<sup>th</sup> Street (at Broadway)  
New York, New York, 10003

### NEW PATIENT HISTORY FORM

**PATIENT NAME:** \_\_\_\_\_

**DOB:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

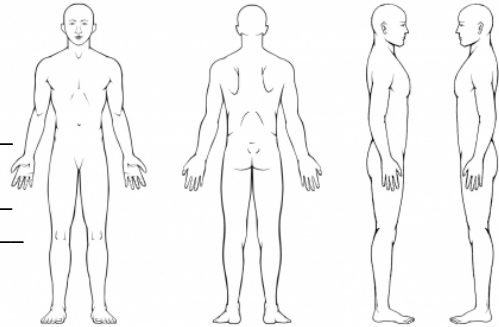
#### Please Indicate the Location of Your Pain on the Diagram

Chief Complaint (Reason for Visit): \_\_\_\_\_

Pain Level:(Mild) 0 1 2 3 4 5 6 7 8 9 10 (Severe) Occasional / Frequent / Constant

How and when did pain begin? \_\_\_\_\_

If your pain is the result of an accident, briefly describe details: \_\_\_\_\_  
\_\_\_\_\_



#### Associated Symptoms: YES NO Where and how often?

Numbness / Tingling \_\_\_\_\_

Weakness \_\_\_\_\_

Bladder Incontinence \_\_\_\_\_

Bowel Incontinence \_\_\_\_\_

Balance Problems \_\_\_\_\_

Fever / Chills \_\_\_\_\_

Joint Stiffness \_\_\_\_\_

Weight Loss \_\_\_\_\_

**Is pain aggravated by?** Sitting Standing Walking Bending forward / backward

**Is pain alleviated by?** Sitting Standing Walking Bending forward / backward

**Pain Description:** Dull/Aching Burning Sharp Shooting Throbbing, Electrical Cramping Tightness Spasm

**Pharmacy Name and Phone Number:** \_\_\_\_\_

Please call our office with any questions or concerns:  
212.371.8460



a Trusted Pain Physician Company

P: 212.371.8460
F: 212.537.7303

Lenox Hill Pain Innovation & Research Center
30 Central Park South (at Fifth Avenue)
New York, New York, 10019

Karan Johar, M.D.
Furqan Tejani, M.D.
Pierre Alex Casthely, M.D.
Rene Hilderbrand, MSPAS, D.O.
Roy Berenholtz, M.D.
Julissa Cruz, M.D.
Julia Zaitsev, R.N.

Greenwich Village Pain Institute & Surgery Pavilion
95 University Place (at 12th Street)
New York, New York, 10003

New York Joint and Bone – Orthopedic Sports Medicine Urgent Care
41 East 11th Street (at Broadway)
New York, New York, 10003

Medical History

Medical Conditions:

Cardiac: Endocrine: Gastro Intestinal:

Heart Attack Diabetes Acid Reflux
Coronary Artery Disease
Hyperthyroidism GI Bleeding
Heart Valve Disorder Hypothyroidism
Gastric Ulcer
Arrhythmia Other
Other
High Blood Pressure
Other

Renal: Respiratory: Vascular
Kidney Disease Asthma Stroke/TIA
Kidney Stones COPD Peripheral
Vascular Disease
Urinary Incontinence
Other Other
Dialysis
Other

Neurological: Psychiatric: Cancer: (type)

Multiple Sclerosis Depression
Seizures Anxiety
Headaches Schizophrenia
Migraines Bipolar Disorder
Other Other

Allergies: Latex: Yes No Contrast Dye: Yes No

Previous Surgery:

Medication/Dose/Frequency

- 1. 2.
3. 4.
5. 6.
7. 8.
9. 10.

Social History: Occupation: Last date worked:

Substance Use: Alcohol Tobacco Marijuana IV Drugs Cocaine
Other
Last use:

Review of Systems: Circle all that apply: Trouble sleeping Lungs/Breathing Neurological Chest Pain Headaches
Thyroid Fatigue Nausea Vomiting Bleeding Vision Memory Dizziness Psychiatric Skin Ringing in Ears Joints/Bones Muscles
Reproductive Urinary

Family History: Age Diseases Alive/Deceased

Father
Mother
Siblings
Children

Please call our office with any questions or concerns:
212.371.8460



a Trusted Pain Physician Company

P: 212.371.8460  
F: 212.537.7303

Lenox Hill Pain Innovation & Research Center  
30 Central Park South (at Fifth Avenue)  
New York, New York, 10019

Karan Johar, M.D.  
Furqan Tejani, M.D.  
Pierre Alex Casthely, M.D.  
Rene Hilderbrand, MSPAS, D.O.  
Roy Berenholtz, M.D.  
Julissa Cruz, M.D.  
Julia Zaitsev, R.N.

Greenwich Village Pain Institute & Surgery Pavilion  
95 University Place (at 12<sup>th</sup> Street)  
New York, New York, 10003

New York Joint and Bone – Orthopedic Sports Medicine Urgent Care  
41 East 11<sup>th</sup> Street (at Broadway)  
New York, New York, 10003

**Pain Management History**

Mark all of the following tests performed for your current pain complaints:

MRI of the: \_\_\_\_\_ Date: \_\_\_\_\_  
XRay of the: \_\_\_\_\_ Date: \_\_\_\_\_  
CT Scan of: \_\_\_\_\_ Date: \_\_\_\_\_  
EMG/NCS: \_\_\_\_\_ Date: \_\_\_\_\_  
Other: \_\_\_\_\_ Date: \_\_\_\_\_

**Pain Medications currently taking:**  
Please list name/dose/frequency

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

**Pain Medications previously taken:**  
List name/dose/frequency/why discontinued

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

**Pain Treatment History:**

Physical Therapy Chiropractic Accupuncture Tens Massage  
Epidural Injection \_\_\_\_\_  
Facet Injection \_\_\_\_\_  
Sacroiliac Joint Injection \_\_\_\_\_  
Radiofrequency \_\_\_\_\_  
Ablation \_\_\_\_\_  
Trigger Point Injection \_\_\_\_\_  
Spinal Cord Stimulator \_\_\_\_\_

Intrathecal Pump \_\_\_\_\_  
Spine Surgery \_\_\_\_\_  
Other \_\_\_\_\_

**Current and previous treating physicians for your current pain complaint:**

Please list Name/Address  
1. \_\_\_\_\_  
2. \_\_\_\_\_

\_\_\_\_\_  
**Patient Signature** **Date**

\_\_\_\_\_  
**Physician's Signature** **Date**

Please call our office with any questions or concerns:  
212.371.8460