

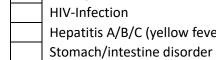
## Dear patients,

a lot of general health disorders and diseases are related to the teeth - with the provided data and the X-ray, you will be helping us to recognize any health disorder and possibly we can even help you outside the tooth/mouth area.

In order to ensure a smooth and effective initial examination, it is for us very important to know in advanced about your complaints, your mouth and health status and your preferences.

Name, First Name	Birthday
Address	Phone number
Place of residence	
Insured	
Name, First Name	Birthday
Address	Phone number
Place of residence Which Company are you medical insured at?	
Do you have an additional dental insurance?	Yes No
Employer?	
E-mail address:	
Have / had any of the following diseases?	
Yes No Asthma, Bronchitis Diabetes Blood clotting disorder	Yes No Osteoporosis HIV-Infection Hepatitis A/B/C (vellow fever)

Heart attack





Yes     No     Yes     No       Stroke     Image: Stroke     Image: Stroke     Image: Stroke       Do you take Marcumar?     Image: Stroke     Image: Stroke		
Do you take regulary any medicines? If so, which ones?		
Allergic reactions / intolerance to medicines or materials? If so, which ones?		
Do you somke? If so, how many cigarettes per day?		
Do you smoke? If so, how many cigarettes per day?		
Who is your doctor?		
Other information, other diseases:		
For Women:         yes       no       Are you pregnant?		
How did you find our clinic?         Family members       Work colleagues         friends       Newspaer		
Concerns: Please inform us about your concerns such as pain, implants, amalgam repair, control,:		
Urgent complaints:		

# Do you have pressing pain in the tooth/mouth? If so, since when?



### **Dentistry history:**

Which treatments have been performed to you in the last 3 years in the dental/mouth area?

#### Mandibular joint:

Do you suffer discomfort or pain in the jawbone area (cracking, crunching)?

Do you suffer from a chronic headache or migraine? If so, how often and in which area of the head?

Dangers of amalgam and metals in the mouth:

Do you want information of the risk on amalgam and metals in the mouth?

#### Would you like an INUSpherese® (blood wash) before the treatment?

You will achieve several goals at the same time. INUSpherese<sup>®</sup> specifically wash out environmental toxins that cause disease and inflammation from the blood. In addition, the INUSpherese<sup>®</sup> has been shown to significantly improve blood circulation in the arterioles and capillaries, i.e. the smallest end branches of the arteries.



NO

## Please send this fulfilled document via e-mail to our clinic before your first appointment office@dr-neubauer-biological-dentistry.com

Please inform us on time (latest 24 hours before) if you won't be able to come to your appointment.

By signing this document, I confirm the completeness and correctness of the information provided above, and I agree that the information will be passed on to third parties for purpose the bill settlement. I absolve the dentist from his duty of secrecy.

I agree to receive information about news and events of the doctor's

Place	and ،	date
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Signature Patient / Legal guardian