Pinnacle Pediatric Clinic
Family Medical/Social History

Condition	Y	N	Who
Alcohol Use, Abuse, Dependence, Addiction	☐ Y	☐ N	Who: ______
Alleries	☐ Y	☐ N	Who: ______
Asthma	☐ Y	☐ N	Who: ______
Eczema	☐ Y	☐ N	Who: ______
Birth Defects	☐ Y	☐ N	Who: ______
Blood Disorders	☐ Y	☐ N	Who: ______
Bone Disorders	☐ Y	☐ N	Who: ______
Cancer	☐ Y	☐ N	Who: ______
Type	☐ Y	☐ N	Who: ______
Endocrine Disease	☐ Y	☐ N	Who: ______
Ear, Nose, Throat Disorders	☐ Y	☐ N	Who: ______
Ear Tubes, Tonsil/Adeniodectomy	☐ Y	☐ N	Who: ______
Eye Diosrders	☐ Y	☐ N	Who: ______
Gastrointestinal Disorders	☐ Y	☐ N	Who: ______
Heart Disease	☐ Y	☐ N	Who: ______
High Blood Pressure	☐ Y	☐ N	Who: ______
High Cholesterol	☐ Y	☐ N	Who: ______
Immune Disorders	☐ Y	☐ N	Who: ______
Joint Problems	☐ Y	☐ N	Who: ______
Kidney Disease	☐ Y	☐ N	Who: ______
Liver Disease	☐ Y	☐ N	Who: ______
Lung Disease	☐ Y	☐ N	Who: ______
Migraine Headachs	☐ Y	☐ N	Who: ______
Obesity/Overweight	☐ Y	☐ N	Who: ______
Seizure Disorder	☐ Y	☐ N	Who: ______
Skin Disorder	☐ Y	☐ N	Who: ______
Stoke	☐ Y	☐ N	Who: ______
Substace Use, Abuse, Dependence, Addiction	☐ Y	☐ N	Who: ______
Tobacco Use, Abuse, Dependence, Addction	☐ Y	☐ N	Who: ______
Thyroid Disorders	☐ Y	☐ N	Who: ______
Mental Health Disease	☐ Y	☐ N	Who: ______

House Hold Information

Name	Relationship to Child	Date of Birth	Lives in home
______			☐ Y ☐ N
______			☐ Y ☐ N
______			☐ Y ☐ N
______			☐ Y ☐ N
______			☐ Y ☐ N
______			☐ Y ☐ N
______			☐ Y ☐ N

Item	Response
Guns	☐ Y ☐ N
Smoke detectors	☐ Y ☐ N
Lead Risk	☐ Y ☐ N
Soure of water	☐ City ☐ Rural ☐ Well
Pets	☐ Y ☐ N
Types	