



**Gadsden Foot Clinic, PC**

306 South 4th Street  
Gadsden, AL 35901

**Short Stay History & Physical**

**Surgery Date:** \_\_\_\_\_

**Diagnosis:** \_\_\_\_\_

**Past Medical History:** \_\_\_\_\_

**Current Medications:** \_\_\_\_\_

**Allergies:** \_\_\_\_\_

**Physical Examination:** T \_\_\_\_\_ P \_\_\_\_\_ R \_\_\_\_\_ BP \_\_\_\_\_

**HEENT:** \_\_\_\_\_

**Heart:** \_\_\_\_\_

**Lungs:** \_\_\_\_\_

**Abdomen:** \_\_\_\_\_

**Other:** \_\_\_\_\_

**Patient is scheduled for out-patient surgery at Riverview Regional Medical Center on :** \_\_\_\_\_

**Patient is cleared for foot surgery by Dr. J. Vanore/Dr. Brooke Gorham.**

**Please FAX completed form to: 256 547-1632**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Patient**