

## Patient Information

Today's Date / Fecha de hoy: \_\_\_\_\_

Patient name / Nombre del paciente: \_\_\_\_\_

Date of birth / Fecha de nacimiento: \_\_\_\_\_

Social security number / Seguro social: \_\_\_\_\_

Address / Direccion: \_\_\_\_\_

City / Ciudad: \_\_\_\_\_ State / Estado: \_\_\_\_\_ Zip / Codico Postal \_\_\_\_\_

Telephone / Telefono: \_\_\_\_\_ Cell / Cellular \_\_\_\_\_

Employer / Empleador: \_\_\_\_\_

### Reason for visit / Razon de visita

- |   |  |
|---|--|
| <input type="checkbox"/> Pre-Employment Physical/Post Offer | <input type="checkbox"/> TB Test                   |
| <input type="checkbox"/> Drug Screen                        | <input type="checkbox"/> Breath Alcohol Test (BAT) |
| <input type="checkbox"/> DMV Physical                       | <input type="checkbox"/> Hepatitis B Vaccination   |

#### Med Plus Atascadero

5920 West Mall, Atascadero  
Phone 805.461.2131 • Fax 805.461.2077

#### Med Plus Central Coast

2271 S. Depot St., Santa Maria  
Phone 805.614.9000 • Fax 805.614.9048

#### Med Plus Pismo Beach

877 N. Oak Park Blvd., Pismo Beach  
Phone 805.474.8450 • Fax 805.474.8454