EDITH A. JONES-POLAND, M.D. AND ASSOCIATES, INC.	Name of	`Patient:			
Dear Patient: In order to address your healthcare concerns today, please complete the questions below:					
What is the one main concern you we	ould like yc	our provider to	focus on	today?	
	v				
What are your healthcare goals? (exar	nples: healthy	diet, exercise, red	ucing medic	cations, losi	ng weight)
				· · · · · · · · · · · · · · · · · · ·	
Do you need any prescriptions refilled	ed today:		NO	Y	ES
We like to be informed and up to o	date about	the care you re	ceive fro	m other p	roviders!
Have you been in the Emergency Room or	· Hospital sin	icė your last offic	e visit?	NO	YES
Please list any specialists you have s since your last office visit:	een or tests	s you have had	complete	ed for the	specialists
			· · · · · · · · · · · · · · · · · · ·		
Insurance on file is:		Is this corre	ect?	NO	YES
NextMD is an online service that all mail messages go directly into your from your chart to you. This service	chart and v				
I would like to enroll in NextMD	NO	YES			