



<b>Q10 Medical History:</b> Please give details of the following:					
Any serious illnesses					
Any operations					
Any current medical problems					
Any serious diseases affecting your family					
<b>Q11</b> Have you had your spleen removed (Splenectomy)?	YES / NO				
<b>Q12</b> Has your mother, father, sister or brother suffered from any of the following before the age of 65?					
Heart Attack	Y / N	Stroke	Y / N	High Blood Pressure	Y / N
Asthma	Y / N	Glaucoma	Y / N	TB	Y / N
Cancer	Y / N	Diabetes	Y / N		
<b>Q13</b> Have you had the following immunisations in the past 10 years?					
Tetanus	Y / N	Date:			
Polio	Y / N	Date:			
Please list any other immunisations below (with dates if possible):					
<b>Q14 Women Only</b>					
When did you last have a breast scan?		Date:	/ Never		
When did you last have a cervical smear?		Date:	/ Never		
Was it carried out at your previous GP Surgery? Y / N					
<b>Other Information</b>					
<b>Q15</b> Marital Status: Single / Married / Widowed / Separated / Divorced / Other					
<b>Q16</b> Nationality / Ethnic Origin:					
<b>Q17</b> If you have moved here from abroad please provide the following information:					
Date you first entered the UK:		From (country):			
<b>Q18</b> Your First Language:					
<b>Q19</b> Name of Next of Kin:			Their relationship to you:		
Their contact details:					
Are you happy for us to discuss your record with them? YES / NO					
<b>Q20</b>					
Housing Details: House / Maisonette / Flat / Mobile Home / Other					
Who lives with you?					
<b>Q21 CARERS</b>					
If someone looks after you or if you are a carer for someone else, please complete a yellow card which you can find in the waiting room and return it to Reception					
Name of your Carer:			Their relationship to you:		
Name of person you care for:			Their relationship to you:		
<b>Q22</b> Have you or your family been allocated a Social Worker at any time? YES / NO					
Have you or your family accessed support from the Early Help Hub?				YES / NO	