

Name _____ DOB _____ HT _____ WT _____

Hobby _____

STORY: _____

Med History

CHF - CANC- ALZHEIMER'S - DEMENTIA -AIDS - HIV - ORGAN TRANSPLANTS

SURG (5YRS- DIABETES - COPD - BIPOLAR/DISORDER- SCHIZOPHRENIA-

HEART ATTACK- STROKE- ALCOHOL ABUSE DRUG ABUSE –ANY FELONY CONVICTIONS

MEDs LIST: BP Drugs: Lisinopril (Prinivil, Zestril), Enalapril (Vasotec), Ramipril (Altace), Benazepril (Lotensin), Losartan (Cozaar), Valsartan (Diovan), Olmesartan (Benicar), Irbesartan (Avapro) Hydrochlorothiazide (HCTZ) Chlorthalidone, Furosemide (Lasix), Spironolactone (Aldactone), Metoprolol (Lopressor, Toprol XL), Atenolol (Tenormin), Carvedilol (Coreg), Propranolol (Inderal), Amlodipine (Norvasc), Diltiazem (Cardizem, Tiazac), Verapamil (Calan, Verelan), Nifedipine (Procardia, Adalat CC), Hydralazine – Direct Vasodilator,

Statins: Atorvastatin (Lipitor), Simvastatin (Zocor), Rosuvastatin (Crestor), Pravastatin (Pravachol), Lovastatin (Mevacor, Altoprev), Fluvastatin (Lescol), Pitavastatin (Livalo, Zypitamag)

Diabetes Meds: Insulin _____ units, Metformin (Glucophage, Glumetza, Fortamet)

Nerve drugs: Gabapentin (Neurontin), Pregabalin (Lyrica), Carbamazepine (Tegretol), Oxcarbazepine (Trileptal), Duloxetine (Cymbalta), Steroids (Prednisone, Methylprednisolone)

Anxiety Meds: Sertraline (Zoloft), Fluoxetine (Prozac), Escitalopram (Lexapro), Paroxetine (Paxil), Citalopram (Celexa) **Depression meds:** Aripiprazole (Abilify), Quetiapine (Seroquel XR), Lithium

BENEFICIARY _____

TARGET PREMIUM _____ Insurance company _____

Please write down:

• Coverage Amount 1 _____ IS _____ PER MO

• Coverage Amount 2 _____ IS _____ PER MO

• Coverage Amount 3 _____ IS _____ PER MO

Banking Information _____

Routing _____ Acct Number _____