Central Santa Rosa
795 Farmers Lane, Suite 10
Santa Rosa, California 95405
Main: 707.571.7615
Fax: 707.571.8601

East Santa Rosa & Oakmont
6574 Oakmont Drive, Suite D
Santa Rosa, California 95409
Main: 707.539.5256
Fax: 707.539.7914

Medicare Questionnaire

Please note: This information is required by Medicare.

Patient Name	Date

Have you fallen two (2) or more times in the past year?	Yes	No
Please explain:		
Have you been injured by a fall in the past year?	Yes	No
Please explain:		

Medication List

Please include all prescriptions, over the counter drugs, vitamin and herbal supplements.	
Name	Dosage
Name	Dosage
Name	Dosage
Name	Dosage
Name	Dosage
Name	Dosage
Name	Dosage
Name	Dosage
Name	Dosage
Name	Dosage