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Health History Form
AOA

Medical History Form
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**HISTORIA DENTAL**

NOMBRE DEL PACIENTE _____ FECHA DE NACIMIENTO _____
 Ciudad en la que vive su médico _____
 Nombre anterior del dentista _____ Dosis de dientes temporales _____
 Fecha de última visita _____ Dosis de dientes definitivos _____
 Con qué frecuencia lo visita su dentista? _____

Algunos de sus dientes semejan los:	Algunos de los dientes:
Dientes o blancos _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Dientes de coloración _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Dientes o blancos _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Cirugía dental _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Molares o premolares _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Ortodoncia dental _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Tiene caries algodonosa de fondo o de mal gusto? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Ortodoncia removable _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Usted sufre tener temor al dentista, miedo, ansiedad o desesperanza? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Ortodoncia permanente _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
No se siente cómodo o tranquilo? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Endodontia permanente _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Usted permaneció / estableció en las clínicas o operaciones en su familia? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Cirugía de los dientes _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Los dientes tienden a ser grandes y/o apretados entre los dientes? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Boca ancha, rota? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Llamadas: Aprieta los dientes o masticar? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	El diente molde o de la procedura ajustada? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Fue sometido a la radiología, un rayo X en el dentista? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Uso gomas dentales o la boca a partir? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Morder los dientes o las encías regularmente? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Uso otros alisadores, alineadores: etc? _____
Respondece buceo intensiva diaria o diariamente? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Hay algún tipo de generación o cambio que sea dolor? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Respondece? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Uso una almohadilla, almohadilla dentista? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Pintar por los dientes de colorante? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Uso una almohadilla, almohadilla dentista? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Si es así, cuál es su preferencia buceo? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Uso una almohadilla, almohadilla dentista? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Algunos de sus problemas dentales:	Algunos de sus problemas dentales:
Al hacer uso de alisadores de la masticación? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Usted ha sentido dolores más frecuentes dolor agudo? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No
Odor fuerte, hedor, la corona, hedor de la boca? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Uso una almohadilla, almohadilla dentista? _____
Usted ha sentido dolor en su dentista la boca? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Uso una almohadilla, almohadilla dentista? _____
Problemas de dientes de masticación, o dientes de la mandíbula? _____ <input type="checkbox"/> Sí <input checked="" type="checkbox"/> No	Uso una almohadilla, almohadilla dentista? _____

Usted tiene conocimiento para informar cualquier información adicional que no se mencionó en la pregunta anterior.

Nombre del paciente _____ Teléfono _____
(Número y teléfono local y local)

Nombre del sapiente _____ Teléfono _____

DENTAL REGISTRATION AND HEALTH HISTORY DATE _____

Patient's Name _____ How do you prefer to be addressed? _____
 Mailing Address _____ City _____ State _____ Zip _____
 Sex: M F Age: _____ Birth date: _____ Single Married Widower Separated Divorced SS# _____
 Home Phone Number: _____ Work Phone Number: _____
 Occupation: _____ Employer: _____
 Employer's Address: _____ City _____ State _____ Zip _____
 If Student, name of School / College: _____ City _____ State _____ PT Full _____
 Whom may we thank for referring you to our office? _____

If the person responsible for this patient's account is different from the patient or if this patient is a minor, the responsible party must fill out the section below. Otherwise, please skip to the section titled "Insurance Information".

Name of responsible party _____ Relationship to Patient _____ SS # _____ DOB _____
 Mailing Address _____ City _____ State _____ Zip _____
 Sex: M F Age: _____ Birth date: _____ Single Married Widower Separated Divorced SS# _____
 Home Phone Number: _____ Work Phone Number: _____
 Occupation: _____ Employer: _____
 Employer's Address: _____ City _____ State _____ Zip _____

INSURANCE INFORMATION
 Policy Holders Name _____ Relationship to Patient _____ SS # _____ DOB _____
 Name of Employer _____ Employee Address _____ State _____
 Insurance Co. _____ Group # _____ Address _____

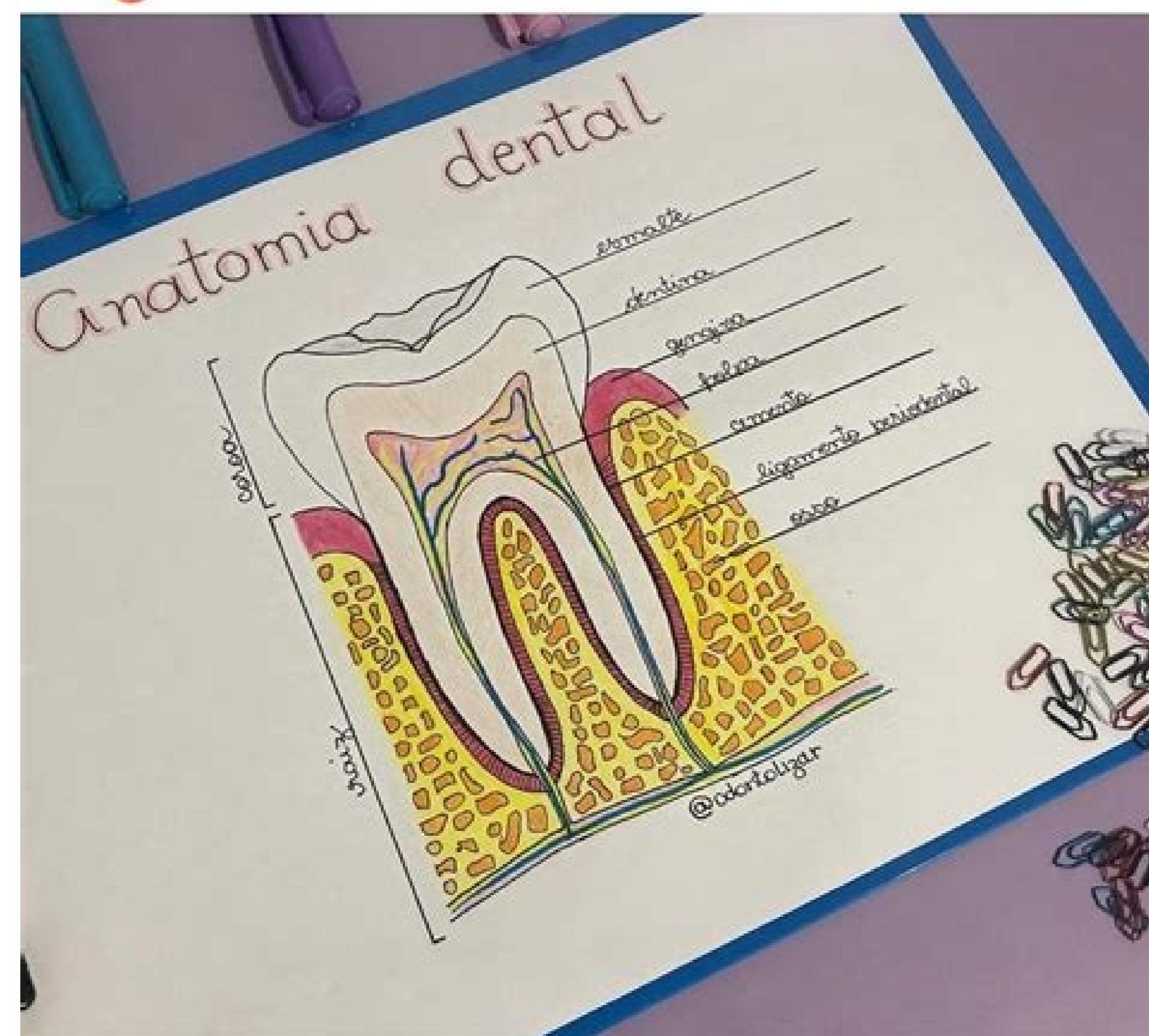
Secondary Insurance Information
 Policy Holders Name _____ Relationship to Patient _____ SS # _____ DOB _____
 Name of Employer _____ Employee Address _____ State _____
 Insurance Co. _____ Group # _____ Address _____

Answers to the following questions are for our records only and will be considered confidential.

1. Have you or any member of your family been seen by us before? Yes _____ No _____
2. If yes, which family member(s)? _____ Physician's Name _____
3. Date of last physical examination _____ Date of last dental x-rays _____
4. Previous dental treatment _____ City/State _____
5. Are you having pain or discomfort at this time? Yes _____ No _____
6. Do you feel nervous about having dental treatment? Yes _____ No _____
7. Have you ever had a bad experience in a dental office? Yes _____ No _____
8. Are you afraid of needles? Yes _____ No _____
9. Is there anything you would like to speak with the Doctor about in private? Yes _____ No _____
10. Have you been a patient in the hospital during the past two years? Yes _____ No _____
11. Have you been under the care of a medical doctor during the past two years? Yes _____ No _____
12. Do you have any allergies? Yes _____ No _____
13. Are you taking any vitamins, herbal supplements or "cures"? Yes _____ No _____
14. Have you ever had any excessive bleeding requiring special treatment? Yes _____ No _____



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Finding the best dental insurance can mean the difference between paying thousands of dollars out of your pocket or getting a lot of your covered treatment. The major dental plans may differ, so check with your plan. It has a great global network of more than 70,000 dentists, which makes it easy for you to see a dentist, even when you are a luity in paris or shots in a sun in the Caribbean. Your dental office will give you a receipt. With dental insurance, it is usually a supplement to the amount of money you are paying out of your pocket. The company has a wide selection of available plans that differ depending on how many people are in your family and what kind of copayment is looking for.

Click on the Pronunciation Guide button on any page for a quickly pop-up key for the pronunciation in Spain. CC0 / OSWALDORUIZ / PIXABAY Understands your Â ç à, alternated benefits: insurers sometimes encode a procedure that obtains from your dentist so that they only have to cover part of it, according to what was established by the IQ. CC0 / Oleg Magni / Pexels People are often excited when they receive dental insurance from their work. United Healthcare is ideal for family plans United Healthcare has a very good comprehensive coverage for families. They offer plans that come with scheduled services graphics Listing the rates for all services in advance. In this lesson, we will learn an Ótil dental dental vocal. Humana dental insurance is ideal for people looking for discounts, human is one of the largest dental insurers in the United States . Dental Cigna is best for global coverage, Cigna Dental is ideal for people traveling to several destinations around the world. Dental Amenities is adequate for those looking for amenitas dental rewards has a rating a + with the best business office, and Available for residents of the 50 states. You will surpass him with this survival guide of the vocabulary of the Spanish dentist. It's right. Each chapter contains a list of Phrases belonging to a specific topic. The following are some of the available options. Delta Dental is ideal for families with a budget, which has been remarkable about Delta Dental is that it is ideal for families who are dedicated to adhere to a budget. You will be responsible for the balance. You can also obtain an option of preventive care with a dental cign, which covers 100 percent of preventive care. DC by 2.0 / Money photos / Flickr Â ç à, → "ABOVE the usual and usual rates: it does not mean what you think it means when insurers say that the amount your dentist is loading is above your rates Commonly, that is not necessarily, so, according to the dental products report. The motivation for the book came from being a faculty in a dental school that attracts a great number of patients who speak Spanish. Âj- Â èIt is important to visit your dentist regularly to maintain healthy teeth and bug and control her oral health? Click on the audio playback symbol next to the phrase to instantly listen to it in English, then Spain. Cc0 / rawpixel.com / pexels can (probably) choose the dentist you want, even if your PPO or HMO offers a list of preferred providers, as it is most likely to go to the dentist you want, even if the dentist is not On that list. You can save a lot of money if you get your recipe through pharmacies on the network, you can annotate discounts on your glasses, and you can also get discounts on things as audition and holistic medicine exams. As such, the company is known to offer all types of discounts, including specials for those who combine dental and vision coverage, special discounts for veterans, etc. CC BY-SA 2.0 / 401 (K) 2013 / Flickr Dental insurance did not exist before 1954 before 1954, all dental costs were paid the individual. CC0 / Quicksandala / Pixabay Many routine dental procedures are not covered by deep cleaning insurance to small fillings, many dental procedures that believed would be For dental insurance often not. CC BY-SA 2.0 / EFILE989 / Flickr dentists charge the same tariffs to all patients who can pay more or less than the next patient, but that is not the dentist's fault. What you pay will depend on your specific insurance plan. It does not mean that they are better dentists. More from Askmoney.com the book, titled Âç à, Â "We go to the dentist (we go to the dentist): It is a vocabulary pocket book / sentely used phrases in the dental office, translated into Spanish and developed For all dental team. Dental insurance is a supplement, not a full coverage when you get a medical insurance, it generally provides a good part of the coverage. More from Sentomfind.com What happens if you are going to visit a Spanish dentist, but you do not speak Spanish? In general, it is a profession that deals with many international clients, as well as the premises. CC BY-SA 3.0 / Nick Youngson / PicServer Your dentist is not necessary to send your insurance forms if you find a dentist who does not take insurance, it simply means that you will have to pay your pocket for the procedure and send your forms from sure. It may mean that your benefits are lower than the average costs loaded by dentists. There is also a list of copayments for each procedure that is covered. How much coverage does your employer determine how much the insurer pays? This list covers common words, phrases and terms related to being in the dentist. Vocabulary of Emanizers: In the Dentistat the Dentistiist - In The Dentistadieving - Dentistadurs - DometeThe Tooth - Onu DenteTheh - Milkwash - Milkwash Tooth - Trial Muela - The IncisivocÃºSpide - Tooth Caninoprimary - The Tooth / Milk Tooth - The Upper teeth / arribalower teeth - lower teeth / abajocanine - colmillotoothbrush The toothbrush toothpaste - the pasta of Breath - Bad AlientodeCay / Cavity - Cariesdental FLOSS - The Thread Dentalcanker So-ÂºÂ» - AftaAmalgam - AmalgamanteRior TEETH - Anorensitive Teeth Teeth - Sensitive Teeth - EncÃºAto Bite - Morderto Brush - Brush Chew - MasticarLaboraTory - LaboratoryJaw - BOCATONGUE - MANAGESE ALSO: Â ,Â Human Body Parts In Spanishnerve - Nerviopatient - PatientPrice - PrecioTome Make an Appointment - Order Hour; Make a dateProcedure - The surgeon - the surgeonantibiotic - the AntibiÃfÃticoJettion - the injectionTh Whitening - The Dentalimplant Whitening - Implant X-Ray - X-RaGrafÃfÃntal Bridge - Bridede Filling - Empasteobturament iÃnPAINKILER - The AnalgÃfÃ © Sicosringe / Needle - Syringe / AguqueExtraction - ExtractionThodontics - Orthodishly Cleaning - A Cleaning Crown - A CORONASEE ALSO: Â ,SPANISH MEDICAL VOCOBULARYTHEÂ , DIALOGUE BETWEEN A PATIENT AND A DENTAL HYGIENIST In The Video Below May Help You Practice Dentistry and Dental Health Vocabulary! Follow Our Site For Instant English Spanish Translation, Daily Grammar, And Vocabulary Lessons. Individual Deductible Can Be Had For AS Low AS \$ 50, and If You Have a Family That HaS You MORE THAN THREE MEMBERS, YouÂ ç à € ™ ll Never Be Hit With A Family deductible Payment. However, IT Great If To Have A Vocabulary List Like This at Hand If You Need It Or If You Are Learning Spanish And Want To Learn The Details Of A Certain Profession Or Subject.Hope This Will Help You A Lot and Certainly Hope You Are In the Hands of Good Dentist! Leave A Comment IF We Have Left Out Any Words Or Sentences That You Would Like To See Added To The Article. Check With Your Insurance Company Before You Book Appointments So That ItÃ ç à € ™ s Clear What YouÃ ç à € ™ ll be responsible for. CC0 / Free-photos / Pixabay 80 to 100 Percent Coverage is not Always Accurate Even Though Insurers Indicate that they pay 80 percent to 100 percent of rates, that is not always true. This helps you plan your costs. It sounds like nothing changed, right? They are excited, that is, until they realize that dental insurance is not as medical insurance. The first insurance plans were introduced at Bay California, and the maximum benefits did not exceed \$ 1,000. The ability to communicate with patients for health-related attention should transcend philosophy on the use of English. Take a look at these interesting data about dental insurance. Gets an additional preferred supplier organization bonus (PPO) if you qualify for rewards and consult a dentist who is within the network. CC BY-SA 3.0 / Nick Youngson / Picpedia "ProviderPrado" is not always the best when an insurer recommends a Â ç à, Â "Preferred supplier", which is more likely to recommend is a supplier that costs less money May others. Your rewards program is insurmountable, and is within walking distance of all the insured that put at least one dental affirmation each year. Choose a chapter topic above to start printing a copy of the entire manual for Reference, click on "Portable PDF". Please note that you can end up paying more. Rewards and bonuses layer at \$ 2,000 in your first year of coverage and increase to \$ 2,900 in the fifth year. The best dental coverage depends on the type of treatment it is offered. To make it easier for you, we have categorized the vocabulary in these sections: Spanish words: For everything in your BocaenglÃ © SspanishtoothDiente, Muela, PullAteethles Teethfront Teeth on Teeth Denta DuraMoleMuelAmilk teeth teeth leggings milkcolor gearboxEraigon / RaeznerViosPalatePaladArtonguela Library LipsuulaÃRigula / of Juicotooth Enamel BracesBrackets Dentist Treats: What they are called call cleaningLimpiezaFillingEmpasteRoot canal treatmentTratamiento de conductoExtractionExtracciÃnDental veneersCarillas dentalesDental cavitiesCaries dentalesDenturesPrÃ³tesis dentalesBracesBracketsDental bridgePuente dentalImplantesTeeth whiteningBlanqueamiento dentalAnestesiaAnesthesiaObjects and terminología at a Spanish DentistEnglishSpanishDentistDentistaDental assistantAyudante de dentistaDental practiceClinica dentalWaiting roomSala de esperaRecepciÃ³n / acogidaDentist chairSillÃ³n DentalAppointmentCitaPrescriptionRecetaToothbrush (brush for cleaning the teeth and tongue)Cepillo de dientesToothpickEscarbadientes, mondadientesFlossSeda flojaToothpastePasta dentalTo brush your DienteCollare Los DientesPlaque Acidlos ÂÄ;Cidos de la Placa BacterianaAadaDedecida (de un diente) PicadaspaÃ±ia TerminologÃa: Especialismo DentalSPANISHEnglishPeriodonticsPeriociaciOndodÃ³nticsIdodonCiaIndictologÃaInclotsInDodÃ³nicosOrtodiociaacialment AestheticsestÃ © Tica Dental Avanzado Dental Clea Ninglimpieza Dental Avanzadaluckilosamente encontrarÃ¡ a muchos dentistas que pueden hablar inglÃ©s. InglatÃ©rs.

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