



# New Patient Information

Thank you for your interest in the **Quadra Health Institute**.

Quadra Health Institute uniquely integrates 4 elements to help people effectively control pain, better manage life's changes, and engage in a balanced lifestyle of movement, harmony, and health.

To learn more about us, please visit our website: [www.quadrahealth.com](http://www.quadrahealth.com)

Please complete and return the entire enclosed packet.

We will use the information you provided to determine if you are a good candidate for our program.

If you are elected as a candidate we will contact/ schedule you promptly.

We require a fifty dollar (\$50) deposit to hold a new patient appointment slot. You will be refunded the fifty dollars after you attend the scheduled new patient evaluation or you may choose to dedicate the fifty dollars for services rendered.

## New Patient Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Gender: Male / Female

Date of Birth: \_\_\_\_\_ Social Security: \_\_\_\_\_

Email address: \_\_\_\_\_

Insurance Provider: \_\_\_\_\_

Referring Physician: \_\_\_\_\_ Primary Care Physician: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**Before we see you, please collect your (relevant to pain) medical records, imaging reports and MRI films or Xrays. If you are not sure where these are; contact your referring physician.**

**Bring the following to your New Patient Evaluation:**

- Insurance card or workers comp/auto claim #
- Medical records, imaging results ie: MRI film(s) and report(s)
- List of current medications

**We look forward to helping you maintain an active lifestyle.**

**Q U A D R A**

3820 COMMONS AVE. NE ALBUQUERQUE NM 87109		HEALTH INSTITUTE	
T	505.343.1711	F	505.343.1862
quadrahealth.com			