



Local Anaesthesia System Review

Do you, or have you ever suffered from the following:

- | | | |
|---|---|-------------------|
| 1. Allergic Reactions | Y | N (please circle) |
| Injected material (anaesthetics, drugs) | | |
| Skin contact material (detergent, leather, tape) | | |
| <hr/> | | |
| 2. Central Nervous System Disorders | Y | N (please circle) |
| e.g. stroke, epilepsy, transient ischemic attacks,
black-outs/fainting, neurological muscle weakness | | |
| <hr/> | | |
| 3. Cardiovascular/respiratory system disorders | Y | N (please circle) |
| e.g. Heart disease, high blood pressure, blood
clotting disorders, lung disease, asthma | | |
| <hr/> | | |
| 4. Metabolic Systems Disorders | Y | N (please circle) |
| e.g. Diabetes, Thyroid problems, liver disease
kidney disease | | |
| <hr/> | | |
| 5. Loco motor System Disorders | Y | N (please circle) |
| e.g. Rheumatoid arthritis, osteoarthritis, poliomyelitis | | |

6. Specific Viral Diseases Y N (please circle)
Hepatitis A, B, or status D, HIV Positive

**7. Are you currently on any prescribed
MEDICATIONS?** Y N (please circle)
steroids, ant-coagulants, hypertensive, diuretics

8. Have you ever undergone Surgery? Y N (please circle)

**9. Have you had a local anaesthetic
Injection Before?** Y N (please circle)

If there are any other concerns our queries, please either email

info@amapodiatry.com.au.

Contact reception for a follow up from our Podiatric Surgeon.

Sound foot structure is the foundation for a healthy life