TINA MARCANTEL, ND NATUROPATHIC PHYSICIAN 6804 S. Kings Ranch Rd., Ste. 102 Gold Canyon, AZ 85118 Tel: 480-738-1647 Fax: 480-779-6317

PATIENT REGISTRATION and PERSONAL INFORMATION (Please Print Clearly)

PATIENT'S FULL NAME		SEX _	
HOME ADDRESS			
CITY	STATE	ZIP CODE	
AGE			
DATE OF BIRTH/	/ PLACE OF	BIRTH	-
MOBILE PHONE	OTH	ER PHONE	
E-MAIL ADDRESS			
NAME OF EMPLOYER			
MARRIED NON-MARRIED PARTNER EMERGENCY CONTACT		RELATIONSHIP	
ADDRESS			
CITY	STATE ZIP COI	DEPHONE	
HOW DID YOU HEAR OF DR. TINA	A MARCANTEL?		
I UNDERSTAND AND AGREE T RESPONSIBLE FOR ALL CHARGE PAY A FEE FOR THE DOCTOR'S T WITH LESS THAN 48 HOURS NOTICE	S ON THIS ACCOUNT. I FIME IF I FAIL TO CAN	UNDERSTAND AND AGREE	E THAT I WILL
SIGNATURE		DATE	

Print Name	
What are your 3 most important health concerns in order of importance?	
1	
2	
3	

MEDICAL HISTORY: Mark "C" (current) or "P" (past) for any conditions you or your relatives have had.

CONDITION	SELF	MOTHER	FATHER	SIBLING	CHILDREN	GRAND PARENTS
ALCOHOL						
ALLERGIES						
ANEMIA						
ARTHRITIS						
ASTHMA						
BLEEDING PROBLEMS						
CANCER						
DIABETES						
DRUGS						
SKIN CONDITIONS						
EMPHYSEMA						
EPILEPSY						
GOUT						
HEART PROBLEMS						
HEPATITIS						
HIGH BLOOD						
PRESSURE						
MENOPAUSE						
MENTAL DISORDER						
MIGRAINES						
PERIOD						
ABNORMALITY						
PMS						
PROSTATE PROBLEMS						
STROKE						
THYROID PROBLEMS						
ULCERS						
VENEREAL DISEASE						
WEIGHT PROBLEMS						

LIST OPERATIONS, MAJOR INJURIES, OR OTHER MEDICAL PROBLEMS – INCLUDE DATE

DATE	PROCEDURE OR EVENT	RESIDUAL/LINGERING EFFECT

	Print Name	
	Dx	
	ALLERGIES	
Preferred pharma	acy name & phone number	
CURRENT PRESO	CRIPTION MEDICATIONS	
START DATE	NAME OF PRESCRIPTION MEDICATION AND REASON FOR USE	DOSAGE
SUPPLEMENTS A	AND/OR VITAMINS	
START DATE	NAME OF SUPPLEMENT AND REASON FOR USE	DOSAGE

Please Read and Initial

	Control Control	
Initial intake visit (approx. 1 hour): \$275.00. Fo ask for specific prices before receiving treatmen		ır (\$65.00-\$220.00). Please
Note: Prices for services are subject to change w		rent prices, please see our
website (www.drmarcantel.com) or ask our rece	eptionist for a price list.	INITIAL
If you have any questions or medical updates proffice visit to consult with the doctor.	Contacting our Office pertaining to your treatment protocol, you mus	st call to schedule a phone or
		INITIAL
We collect payment for services and test kits in insurance . However, some may be covered by this is a covered benefit. Dr. Marcantel is not in At your request, a superbill will be provided freimbursement. Please contact your insurance p AHCCCS, and Tricare do not cover naturopath insurance, please request an itemized receipt and	r some insurance plans; check with your insurannentwork with any insurance providers and do for you to send in to your insurance company provider directly with questions about covered such services. We do not accept Care Credit. If y	ance company to determine if these not submit billing claims. If for possible out-of-network services. Medicare, Medicaid, you would like to file to your
A fee of \$50.00 is incurred if an appointment is	<u>Cancellation Policy</u> cancelled with less than 48 hours notice.	
		INITIAL
Your signature below verifies the understanding state licensed naturopathic physician, consent fo charge.		
Signature _X	DATE	
Name of Minor Patient	Relation to Minor _	

Print Name

Dr. Tina Marcantel BLOOMM Studios 6804 S. Kings Ranch Road, Suite 102 Gold Canyon, AZ 85118 (480) 738-1647

Our office is located near the crossroads of U.S. 60 and Kings Ranch Road in Gold Canyon. When **coming** from the west (Apache Junction) on Highway 60, do a U-turn at the traffic light at Kings Ranch Road, then immediately get in the right-hand lane and take a right into the first parking lot.

When **coming from the east on Highway 60**, go past the traffic light at Kings Ranch Road and then take the first right into the parking lot of our complex.

If entering from S. Kings Ranch Road, **drive into the complex behind the buildings facing Kings Ranch Road** and look for building 6804. You can also look for the large BLOOMM Studios sign on the building.

Our office is in **Building 6804**, right next to Stripes Primary and Urgent Care and in the same building as Vitality Physical Therapy. We are in Suite 102 (BLOOMM Studios).

