

**SOUTH CAROLINA CARDIOVASCULAR SURGERY
CAROLINAS HOSPITAL SYSTEM**

805 Pamplico Hwy, Medical Mall B, Ste. 230
Florence, S.C. 29505

Phone: 843-676-2760
Fax: 843-676-2762

PATIENT INFORMATION

Can we leave results or information on your home answering machine? Yes No
Cell Voice Mail? Yes No

OFFICE USE ONLY

Chart # _____
 New Patient
 Patient Update

**WELCOME! PLEASE PRINT CLEARLY
PATIENT INFORMATION**

PATIENT NAME _____ BIRTHDATE _____ AGE _____ GENDER _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ OCCUPATION _____

HOME PHONE # _____ CELL/BEEPER # _____

PATIENT EMPLOYER _____ WORK PHONE # _____

EMPLOYER ADDRESS _____ CITY _____ STATE _____ ZIP _____

MARITAL STATUS _____ SS# _____

LIST ALL FAMILY MEMBERS FIRST & LAST NAMES THAT ARE PATIENTS HERE _____

INSURANCE INFORMATION

SELF PAY: YES NO

GROUP# _____

I. PRIMARY MEDICAL INSURANCE CO _____ ID# _____

SUBSCRIBERS NAME _____ BIRTHDATE _____ SS# _____

SUBSCRIBERS ADDRESS IF DIFFERENT FROM PATIENT _____

RELATIONSHIP TO PATIENT _____

SUBSCRIBERS EMPLOYER _____

II. SECONDARY MEDICAL INSURANCE CO _____ ID# _____

SECONDARY SUBSCRIBERS NAME _____ BIRTHDATE _____ SS# _____

SECONDARY SUBSCRIBERS EMPLOYER _____

EMERGENCY NOTIFICATION INFORMATION

IN CASE OF EMERGENCY, PLEASE NOTIFY _____ RELATIONSHIP _____

HOME PHONE # _____ WORK PHONE # _____

INSURANCE CARD COPIED: YES NO

