

Additional Patient Information

Our office is changing to Electronic Medical Records (EMR). The following information is considered mandatory through the Health and Human Services meaningful use requirements.

Name: _____

DOB: _____

Please "X" the appropriate box below.

Race

African American

Hispanic

Asian

Native American

Caucasian

Pacific Islander

Other: _____

Unknown

Ethnicity

Hispanic or Latino

Not Hispanic or Latino

Unknown/Unreported

Primary Language

Chinese

German

Korean

Yupik

English

Hmong

Russian

Multiple Languages

Filipino

Japanese

Spanish

Unknown/Unreported