

# KIDNEY SPECIALISTS, PLLC

Babak Barmar, MD Rachita Prakash, MD

Dear Mr./Mrs./Ms. \_\_\_\_\_

Dr. \_\_\_\_\_ has referred you to our practice for an appointment with

Dr. \_\_\_\_\_ on Date: \_\_\_\_\_.

Scheduled: \_\_\_\_\_ Martinsburg Office (304)449-3778 Address: 1004 Sushruta Dr Suite A Martinsburg, WV 25401

\_\_\_\_\_ Winchester Office (540)313-6563 Address: 1870 Amherst St Suite 2A Winchester, VA 22601

\*Any records released to our office can be faxed to (304)449-3777 / for both offices.

**Please fill out the packet mailed to you and bring with you** at the time of your Appointment.

We recommend you **bring all of your current Medications, Photo ID, and your Insurance Cards.**

**New patients are asked to arrive 15 minutes early.**

\*If you have a POA (Power of Attorney) a copy is required on your date of service.

You were scheduled by: \_\_\_\_\_ If for any reason you are unable to make your appointment please contact us A.S.A.P. and specify which office you are scheduled in.

## **Directions to the Martinsburg Office Location:**

From the South: Take I-81 North to Exit 14, making a right off of the ramp (keep straight) passing Berkeley Medical Center on the right, go pass the Tuscarora Elementary School on the left, shortly make a right turn into "Briarwood Professionals" Entrance, go to the last building on the right. 1004 Sushruta Drive - Suite A.

From the North: Take I-81 South to Exit 14, making a left off of the ramp (keep straight) passing Berkeley Medical Center on the right, go pass the Tuscarora Elementary School on the left, shortly make a right turn into "Briarwood Professionals" Entrance, go to the last building on the right. 1004 Sushruta Drive - Suite A

From the East: From the Four way stop (+) on Rockcliff Drive/ Tavern Road, (slowly... heading in the direction of I-81) Pass the "Center for Orthopedic building" on the right, then turn left into "Briarwood Professionals" directly across the road from Urgent Care /Berkeley Family Medicine. Go to the last building on the right.  
Address: 1004 Sushruta Drive - Suite A

# KIDNEY SPECIALISTS, PLLC

BABAK BARMAR, MD

RACHITA PRAKASH, MD

1004 SUSHRUTA DRIVE SUITE A

1870 AMHERST STREET SUITE 2A

MARTINSBURG, WV 25401

WINCHESTER, VA 22601

PH#: (304)449-3778 FAX: (304)449-3777

PH# (540)313-6563 FAX: (304)449-3777

PATIENT'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_ WORK: \_\_\_\_\_

## PAST MEDICAL HISTORY: (PLEASE CHECK)

DIABETES \_\_\_ CHEST PAIN \_\_\_ HIGH CHOLESTEROL \_\_\_ HIGH BLOOD PRESSURE \_\_\_ HEART SURGERY \_\_\_  
HEART ATTACK \_\_\_ HEART PALPITATIONS \_\_\_ HEART MURMUR \_\_\_ CONGESTIVE HEART FAILURE \_\_\_  
PACE MAKER \_\_\_ BLOOD IN URINE \_\_\_ KIDNEY DISEASE \_\_\_ KIDNEY STONES \_\_\_ VASCULAR DISEASE \_\_\_  
BLOODCLOTS \_\_\_ HIV \_\_\_ CANCER \_\_\_ TUBERCULOSIS \_\_\_ RHEUMATOID ARTHRITIS \_\_\_ LUPUS \_\_\_  
LIVER DISEASE \_\_\_ FEVER \_\_\_ HEPATITIS \_\_\_ STROKES \_\_\_ THYROID DISEASE \_\_\_ TRANSPLANT /YR \_\_\_

## PAST SURGERY:

LIST: \_\_\_\_\_ YEAR: \_\_\_\_\_

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LIST: \_\_\_\_\_ YEAR: \_\_\_\_\_

**SOCIAL HABITS:** CURRENT SMOKER? \_\_\_\_\_ HOW MANY PACKS A DAY? \_\_\_\_\_ QUIT/YEAR \_\_\_\_\_

DO YOU DRINK ALCHOLOL? (CIRCLE) YES or NO HOW MANY DRINKS DAILY? \_\_\_\_\_ PER WEEK? \_\_\_\_\_

## FAMILY HISTORY: (HIGH BLOOD PRESSURE, STROKE, HEART ATTACK, DIABETES)

FATHER \_\_\_\_\_ MOTHER \_\_\_\_\_ BROTHER \_\_\_\_\_ SISTER \_\_\_\_\_

FATHER \_\_\_\_\_ MOTHER \_\_\_\_\_ BROTHER \_\_\_\_\_ SISTER \_\_\_\_\_

EMERGENCY CONTACT: (HIPPA) PERMISSION TO RELEASE INFO FOR HEALTHCARE, APPOINTMENTS AND BILLING INFO.

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

Today's Date: \_\_\_\_\_ Signature: \_\_\_\_\_

## PATIENTS MEDICATION TRACKER

PATIENTS NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ DATE: \_\_\_\_\_

MEDICATION NAME:	MG	AM	NOON	PM	ONCE A DAY	TWICE A DAY	THREE X A DAY	SPECIAL INSTRUCTIONS

**LIST ALLERGIES:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_