



KANSAS PAIN MANAGEMENT  
 10995 QUIVIRA ROAD, OVERLAND PARK, KS 66210  
 Phone: 913.339.9437 Fax: 913.339.9538

**PATIENT REGISTRATION FORM**

Current Insurance Cards and Driver's License Must Be Presented to Front Desk For Each Appointment and Copayment Made Prior to Being Seen By Provider

TODAY'S DATE	
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<b>PATIENT DETAILS</b>	
PATIENT TITLE	MR    MRS    MS    DR
PATIENT NAME	PATIENT SSN
DATE OF BIRTH	SEX    MALE    FEMALE    OTHER
MARTIAL STATUS	SINGLE    MARRIED    DIVORCED    WIDOWED    SEPARATED    LIVE IN
REFERRING PROVIDER	
REFERRING PHYS PHONE	REFERRING PHYS FAX

<b>PATIENT ADDRESS</b>	
ADDRESS	APT #
CITY	STATE    ZIP CODE
HOME TELEPHONE	LEAVE MESSAGE ON ANSWERING MACHINE    YES    NO
WORK PHONE	
CELL PHONE	ALLOW TEXT MESSAGES ON CELL PHONE    YES    NO
REQUEST TO RECEIVE REMINDER APPT CALL	YES    NO
EMAIL	

<b>PATIENT CONTACTS</b>	
EMPLOYER	
EMPLOYMENT STATUS	UNKNOWN    FULL TIME    UNEMPLOYED    SELF EMPLOY    RETIRED    ACTIVE MILITARY    STUDENT FT    STUDENT PT
OCCUPATION	
EMPLOYER ADDRESS	
CITY	STATE    ZIP CODE
EMERGENCY CONTACT NAME	EMERG CONTACT RELATION
SPOUSE/PARENT/GUARDIAN NAME	PHONE NUMBER
SPOUSE/PARENT/GUARDIAN EMPLOYER	

<b>OTHER INFO.</b>	
PREFERRED LANGUAGE	RACE
ETHIC GROUP	RELIGION
NATIONALITY	US CITIZEN    OTHER
DRIVERS LICENSE NO.	DRIVERS LICENSE STATE
REFERRAL SOURCE	
MEDICATION HISTORY CONSENT	UNKNOWN    YES    NO    PHYSICIAN ONLY

<b>PATIENT PHYSICIANS IN WHICH YOU ARE CURRENTLY UNDER CARE</b>	
PHYSICIAN NAME	
PHYSICIAN TYPE	

<b>BILLING INFO.</b>	
GUARANTOR	SELF    SPOUSE    PARENT    LEGAL GUARDIAN    OTHER
PATIENT ATTORNEY	ATTY PHONE
FINANCIAL CLASS	COMMERCIAL    MEDICARE    WORK COMP    AUTO    SELF PAY

HOW DID YOU HEAR ABOUT US?	
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