FLINT
FAMILY HEALTHCARE
4 N. MAIN STREET
MAYSVILLE, GA 30558

Dr. Gary Kinsey, M.D. & Joshua F. Gastley FNP-C
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Well Checkup - 5-10 Years

Patient Name:

_____DOB:_____Appt. Date: _____

Eating Habits: (Choose any that may apply) ☐ Fair ☐ Good ☐ Poor ☐ Prefers Breads ☐ Prefers Fruits ☐ Prefers Meats ☐ Prefers Vegetables	Bedtime Drinks (Choose any that may apply) ☐ Juice ☐ Milk ☐ Water
Discipline Problems:(Choose any that may apply) ☐ Biting ☐ Fighting ☐ Frequent Temper Tantrums ☐ Hitting, Refusals ☐ Thorwing Toys in Anger	Sleeping through the night: ☐ Yes ☐ No
Bed Wetting: ☐ Yes ☐ No	Bowel Movement Concerns: ☐ Yes ☐ No
Additional Comments:	

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Nutritional Issues

Please cirlce *yes* or *no* in response to each of the categories below

Anemia ☐ Yes ☐ No	Weight concerns ☐ Yes ☐ No	Daily Vitamins ☐ Yes ☐ No	Chronic GI Problems: ☐ Yes ☐ No	Special Diet ☐ Yes ☐ No	Food Allergies: ☐ Yes ☐ No
Diet (Number of servings per day)					
Dairy	Protein	Vegetables	Fruits	Carbohydrates	
Nutritional Comments:					

Developmental Tasks

School:	Circle all that apply.				
Grade Level:	___Pre-K, ___Kindergarten, ___First, ___ Second, ___Third, ___Fourth, ___Fifth, ___Sixth				
Social Interaction	Has a best friend Interested in music/art Involved in clubs/extracurricular activities Involved in sports Lack of interest in after-school activities Withdrawn	Yes No Yes No Yes No Yes No Yes No Yes No	Performance	Above-average grades Average grades Below-average grades Schoolwork is difficult	Yes No Yes No Yes No Yes No
Behavior	Has been involved in disagreements Parent/Teacher conferences regarding behavior Suspension Talkative in classes	Yes No Yes No Yes No Yes No	Attention	Does not pay attention Lack of interest No interaction in class Skips classes	Yes No Yes No Yes No Yes No
Homework	Does not bring school books home Does not do homework Has a quiet place to study Satisfactory	Yes No Yes No Yes No Yes No	Home Cooperation:	Argumentative Does not follow rules Does not help with household chores Helpful Lethargic Participated in household chores	Yes No Yes No Yes No Yes No Yes No Yes No