



Fax Cover Sheet

To:

Dr Charles Monteith A Personal Choice

From:

Fax: (919) 883-4036

Phone: (919) 977-5050

Pages: (8 Max)

Date:

Name:

Birth Date:

Height:

Weight:

Home Phone:

Work Phone:

Cell Phone:

Email:

Have you had an abdominoplasty (tummy tuck)? Yes No

Have you had C-sections? Yes No If yes then how many?

Medical History

Current Medications

Are you sending your records to be evaluated for:

- Tubal ligation reversal
- Tubal surgery to repair blocked tubes from causes other than tubal ligation
- Essure reversal
- Essure removal