Registration Form

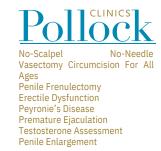
Adolescent & Adult Circumcision



Patient Information		Date :	
Last name		First name	
Date of birth (mm/dd/yyyy)		Care card number (PHN) if available	
Address		City Postal Code	
Home Phone	Preferred Contact (if different)	Email	
Emergency Contact Name		Emergency Contact Phone	
Medical History			Yes No
Do you have a history of easy bruising?			
Do you have nosebleeds with little or no trauma?			
Have you ever had abnormal or prolonged bleeding after a dental procedure?			
Did you have any medical or bleeding problems, or blood loss, since birth?			
Does your family have any history of bleeding problems or low platelets?			
Do you have any reason to believe that you have low blood pressure, low hemoglobin or low platelets?			s?
Have you ever experienced fainting after an injection or medical procedure?			
Have you ever been bothered by a tight band on the under surface of the head of your penis that causes pain or bleeding during sex?			ses pain
If you haven't had a previous vasectomy, have you ever considered having one?			
If you answered yes to a	any question above, please describe		
Please list any medication	ons you are taking (name/dosage)		
Physician Information	on		
Family Physician	Address	Phone	9
Referring Physician	Address	Phone	9

Consent Form

Adolescent & Adult Circumcision



I have carefully considered the risks and benefits of this to seeing Dr. Pollock, Dr. Chang or Dr. Goldstein.	procedure as outlined in the manual and on the website prior		
I understand that Dr. Pollock, Dr. Chang and Dr. Goldstein are one of the few doctors offering circumcision on adults unde local anesthesia and they have explained to me this new approach.			
I understand that the potential benefits of circumcision in Improved hygiene Reduced risk of urinary tract, bladder and kidney infections Reduced risk of phimosis (tightening of the foreskin from prolonged inflammation)	Reduced risk of prostate cancer Reduced risk of penile cancer Reduced risk of HIV/AIDS Reduced risk of cervical cancer in woman (man's partner)		
	eccur, although the frequency varies with skill and experience g's or Dr. Goldstein's practice. Complications may include: • Injury to the urethra – Urethro Cutenous Fistula (1/3,000) • More serious complications including death (never in our practice) (1/1,000,000) • Pain during and after sex post op (1/1,000) • Tightness or painful scar at the incision site post op, which may be long-term (1/2,000) • Increased or decreased sensation to the penis (1/1,000) • Tight frenulum requiring frenulectomy (1/3,000)		
modalities to stop any bleeding should it occur: • Pressure dressings • Skin glue	. Chang or Dr. Goldstein to use some or all of the following • Bipolar cautery • Suturing		
I understand that Dr. Pollock, Dr. Chang and Dr. Goldstein are de-enrolled from MSP. Therefore patients are billed directly for their privatized service.			
I confirm that I have not taken any anti-inflammatory me Aspirin, Motrin, etc.	edications in the last 7 days. Examples: Advil, Ibuprofen,		
Name	Date		
Signature	_		