



Bret Sokoloff, MD, MBA  
Orthopaedic Surgeon

### SOCIAL HISTORY

Highest education: ☐ Grade school ☐ High School ☐ College ☐ Graduate  
Marital Status: ☐ Single ☐ Married ☐ Divorced  
Widowed Are you employed? ☐ Yes ☐ No ☐ Retired  
Occupation \_\_\_\_\_  
Are you disabled? ☐ Yes ☐ No Reason: \_\_\_\_\_  
Ambulation: ☐ Independent ☐ Brace ☐ Cane ☐ Walker ☐ Wheelchair/Stretcher  
Crutches Who do you live with? ☐ Alone ☐ Others Who? \_\_\_\_\_  
Are you or have you been in a drug or alcohol program in the past? ☐ Yes ☐ No  
Are you or have you been treated by a pain management clinic? ☐ Yes ☐ No  
Do you smoke? ☐ Never ☐ Former ☐ Current  
How much do you smoke? ☐ 1/4 PPD ☐ 1/2 PPD ☐ 1 PPD ☐ 2 PPD  
How many years have you smoked? ☐ 1-5 ☐ 5-10 ☐ 10-15 ☐ 15-20  
>20 How much alcohol? ☐ None ☐ Occasional ☐ Moderate ☐ Heavy  
What type of alcohol? ☐ Beer ☐ Liquor ☐ Wine  
Do you use illicit drugs? ☐ Yes (CIRCLE: Crack/Cocaine, Marijuana, Heroin, Other) ☐ No  
How has your health been recently? ☐ Poor ☐ Fair ☐ Good ☐ Excellent Exercise level?  
☐ None ☐ Occasional ☐ Moderate ☐ Heavy

### FAMILY HISTORY

NONE KNOWN ☐  
Father alive? ☐ Yes ☐ No Age of death? \_\_\_\_\_  
Mother alive? ☐ Yes ☐ No Age of death? \_\_\_\_\_  
☐ Arthritis ☐ High Blood Pressure ☐ Psychiatric  
☐ Diabetes ☐ Kidney Disease ☐ Alcohol Abuse  
☐ Heart Disease ☐ Cancer ☐ Drug Addiction