Client Health Information

Contact Information

Name _____ Today's Date _____

Street Address _____ Date of Birth _____

City _____ State _____ Zip _____ Cell Phone _____

Occupation _____ Home Phone _____

Email _____

Emergency Contact _____ Emergency Phone _____

Health Concerns and Goals for Optimum Health

Primary reason for receiving this work _____

Issues or challenges in your life as a result of this _____

_____

Incident or Cause _____ Date _____

Your Level of Pain or Discomfort (1 equals no pain or discomfort / 10 is the highest level of pain)

_____

1 10

Other Health Concerns _____

Activities that are Limited Due to Other Health Concerns _____

_____

Incident or Cause _____ Date _____

Your Level of Pain or Discomfort (1 equals no pain or discomfort / 10 is the highest level of pain)

_____

1 10

Please describe what is your ideal health outcome and state of health: _____

_____

_____

Health History

Please describe all surgeries, injuries, and major illnesses you have experienced (include dates).

_____

_____

_____

_____

_____

_____

_____

Please list any other past or current health conditions that may include, but is not limited to issues of joints and muscles, respiratory/cardiovascular, nervous system, skin conditions, digestive system, reproductive system, and allergies. Include any medications you are currently taking.

_____

_____

_____

_____

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_____

Consent for Care

I agree to participate fully in my own health care and promise to inform my manual therapist at any time that I feel my well-being is threatened or compromised in any way. I agree that the information I have provided is accurate and I have reported all health conditions that I am aware of at this time. I agree to inform my manual therapist of any changes in my health. It is my choice to receive manual therapy and I give my consent to receive treatment.

Signature _____ Date _____

☐ Please check this box if you DO NOT wish to receive occasional email updates. Your contact information will never be shared and you will be able to unsubscribe at any time.