

First Name:

Last Name:

Date of Birth:

Height:

Weight:

Email:

Phone:

Emergency Contact Name:

Emergency Contact Phone/Email:

Occupation:

Do you have any health concerns? Yes No **If yes, please provide details:**

What Medical Help have you seen for your current situation?

Doctor

Chiropractor

Physiotherapy

Osteopathy

Have you had any surgery? Yes No **If yes, please provide details:**

Are you currently on any pain or other medications? Yes No **If yes, please provide details:**

Do you have trouble sleeping due to pain?

What is your primary reason for requesting an assessment?

What are your short-term goals?

What are your long-term goals?

What have been your successes to date?

How much time are you willing to invest in your health/wellness (hrs/day)? 0.5 1 2 3

What time is best for you to work on your health/wellness?

AM PM SPLIT ANY PRE WORKOUT POST WORKOUT

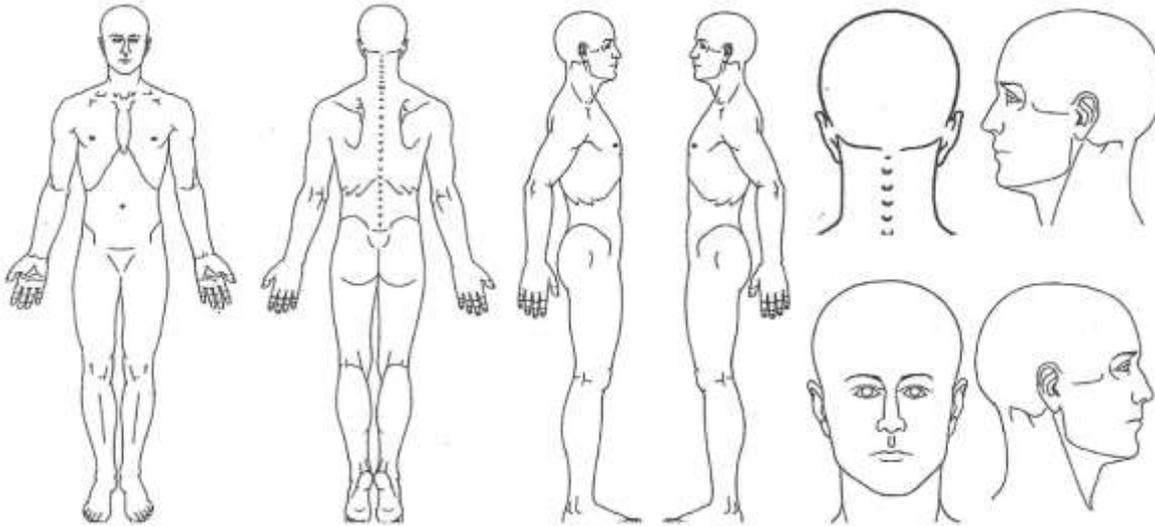
What type of learner do you consider yourself to be?

Auditory (learn better listening to things)

Visual (learn better watching things)

Kinaesthetic (learn better by doing things)

Please draw a number(s) (1, 2, 3, etc) on the diagrams below where you feel any pain/tightness



FOR EACH NUMBER YOU MARKED ON THE ABOVE DIAGRAM, COMPLETE THE:

LOCATION #1

Do you feel any (check): Muscle Tightness Numbness Pins & Needles Burning Dull Aching Sharp Stabbing

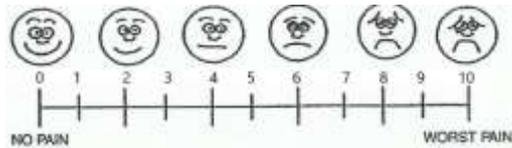
Is the feeling: Constant Intermittent

How long does the feeling typically last for?

What (if anything) makes the feeling better?

What (if anything) makes the feeling worse?

Rate your pain/comfort level using the below scale:



LOCATION #2

Do you feel any (check): Muscle Tightness Numbness Pins & Needles Burning Dull Aching Sharp Stabbing

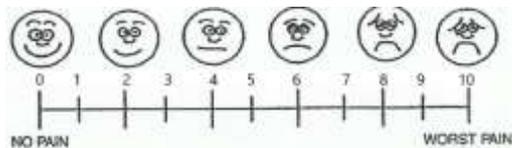
Is the feeling: Constant Intermittent

How long does the feeling typically last for?

What (if anything) makes the feeling better?

What (if anything) makes the feeling worse?

Rate your pain/comfort level using the below scale:



LOCATION #3

Do you feel any (check): Muscle Tightness Numbness Pins & Needles Burning Dull Aching Sharp Stabbing

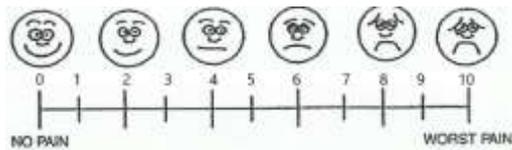
Is the feeling: Constant Intermittent

How long does the feeling typically last for?

What (if anything) makes the feeling better?

What (if anything) makes the feeling worse?

Rate your pain/comfort level using the below scale:



LOCATION #4

Do you feel any (check): Muscle Tightness Numbness Pins & Needles Burning Dull Aching Sharp Stabbing

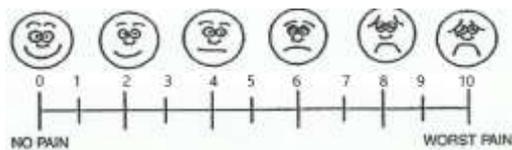
Is the feeling: Constant Intermittent

How long does the feeling typically last for?

What (if anything) makes the feeling better?

What (if anything) makes the feeling worse?

Rate your pain/comfort level using the below scale:



LOCATION #5

Do you feel any (check): Muscle Tightness Numbness Pins & Needles Burning Dull Aching Sharp Stabbing

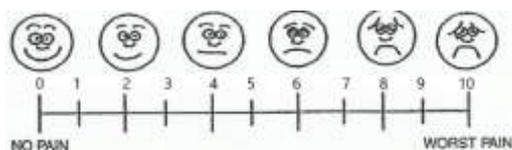
Is the feeling: Constant Intermittent

How long does the feeling typically last for?

What (if anything) makes the feeling better?

What (if anything) makes the feeling worse?

Rate your pain/comfort level using the below scale:



LOCATION #6

Do you feel any (check): Muscle Tightness Numbness Pins & Needles Burning Dull Aching Sharp Stabbing

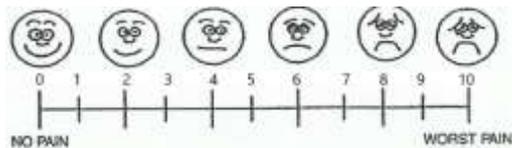
Is the feeling: Constant Intermittent

How long does the feeling typically last for?

What (if anything) makes the feeling better?

What (if anything) makes the feeling worse?

Rate your pain/comfort level using the below scale:



LOCATION #7

Do you feel any (check): Muscle Tightness Numbness Pins & Needles Burning Dull Aching Sharp Stabbing

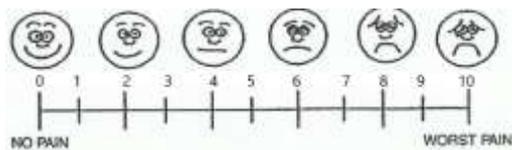
Is the feeling: Constant Intermittent

How long does the feeling typically last for?

What (if anything) makes the feeling better?

What (if anything) makes the feeling worse?

Rate your pain/comfort level using the below scale:



LOCATION #8

Do you feel any (check): Muscle Tightness Numbness Pins & Needles Burning Dull Aching Sharp Stabbing

Is the feeling: Constant Intermittent

How long does the feeling typically last for?

What (if anything) makes the feeling better?

What (if anything) makes the feeling worse?

Rate your pain/comfort level using the below scale:

