



BACKFIT CHIROPRACTIC AND REHAB

Chandler Gilbert Mesa Phoenix

Dr's Initials: _____

PATIENT HISTORY

Chief Complaint : _____ When did it start? _____

Circle the current pain level of your complaint:

1	2	3	4	5	6	7	8	9	10
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Mild

Severe

Circle the percentage of day you experience the complaint:

10	20	30	40	50	60	70	80	90	100
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Has the pain ever been a level 9 or 10? Yes No

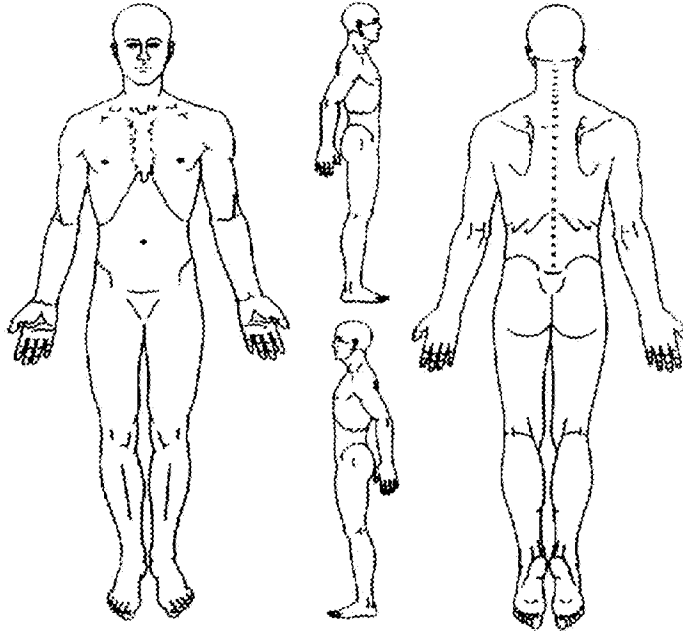
When do you feel it most? AM PM When present, how long does the complaint last? _____ Mins _____ Hrs

What makes it feel better? _____ What makes it feel worse? _____

Note: If you need additional sheets, please ask the front desk.

Using the letters below, please show **where** you are experiencing **all** of your current complaints:

- A: Ache
- B: Burning
- C: Cramping
- D: Dull Pain
- F: Stiffness
- N: Numbness
- R: Throbbing
- S: Soreness
- T: Tingling
- X: Sharp Pain



Do you currently have pain and/or difficulty performing any of the following activities? (Circle Y or N)

- Walking Y N
- Standing Y N
- Running Y N
- Sleeping Y N
- Driving Y N
- Personal Grooming Y N
- Sitting Y N
- Kneeling Y N
- Exercising Y N
- Bending Y N
- Lifting Objects Y N
- Lifting Children Y N
- Housework Y N

- Have you ever had the condition(s) in the past? Yes No If yes, please indicate what sort of treatment have you ever had: Hospitalization Chiropractic care Medical doctor / Specialty provider None
- Have you ever lost work due to your condition(s)? Yes No If Yes, dates? _____
- Are you pregnant? Yes No Number of pregnancies? _____ Number of miscarriages? _____
- What was the first day of your last menstrual cycle? _____

In the event we can help, please indicate to us what your level of commitment would be to correcting your problem(s)?

Low			Medium				High			
0	1	2	3	4	5	6	7	8	9	10

By signing below, I acknowledge that the above information is true and accurate to the best of my knowledge:

Patient Name (please print): _____

Patient Signature: _____

Date: _____

Note: This is a confidential record and will be kept in this office. Information contained here will not be released to anyone without authorization to do so.
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