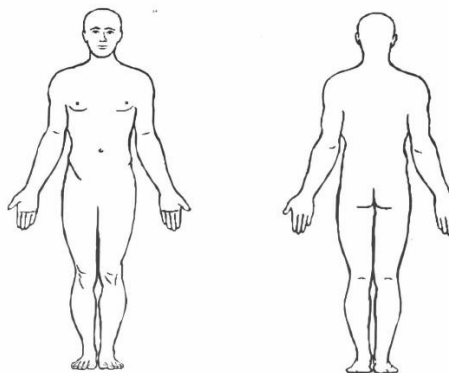




MAIN REASON FOR CONSULTATION:

What is your current problem, the reason for your consultation? Give as much information as possible.

Please indicate where you are experiencing pain:



What is the duration of your current pains?

- Less than 3 months
- 3-12 months
- 1-2 years
- More than 2 years

Please rate your current pain out of 10, where 10 is the most severe pain YOU have ever experienced.

_____ /10

Are you using pain medication for your current pains?

- No
- Yes, over the counter or non-prescription pain medications. Please specify: _____
- Yes, prescription pain medications. Please specify: _____

Did you have any prior intervention for these pains?

- No.
- Received an injection (cortisone) from a GP.
- Physiotherapy/biokinetics/chiropractor/massage
- Exercise e.g., Pilates

If you had previous interventions, what was the duration of non-operative treatment?

- Less than 6 weeks
- 6 weeks to 3 months
- 3-6 months
- 6-12 months
- One year
- More than 1 year?

What other or new medications are you currently using?

Previous surgery:

Have you had SPINAL surgery before?

- No
 - Yes (please give more information, where was the surgery done) _____
-

Have you had any OTHER surgery?

- No
 - Yes (please give more information, where was the surgery done) _____
-

How long ago was the surgery done?

- Less than 3 months
- 3-12 months
- More than 1 year





Do you know what type of surgery was done?

Do you know which spinal levels were done?

Since your last chiropractic visit, has anything else changed in your life? Any new accidents, injuries, falls, hospitalizations, new medications, new diseases diagnosed, pregnancies etc.?

Anything else you want Dr. to know about?



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 Dr Vicki Ferreira Chiropractor