

Healthy Habits and Lifestyle Information																										
Water Consumption (oz)	-	36	48	64	76	96	+	Hours spent sitting			1-3	4-6	7-9	10-12	>12											
Exercise: Days/Week	0	1-3		4-6		7	Walking		Jogging/Running			Swimming		Biking	Yoga/Pilates		Sports		Hiking							
Exercise Experience	None												Confident lifting?		Y	N	Comfortable		Y	N						
Daily Sun Exposure	Y	N	Hours outside daily			0	1-3		4-6		>6		Consistent wake up time			Y	N	Wake up time								
Diet/Nutritional Considerations	None																									
Latest meal			Breakfast		Y	N		Fruits and veggies daily			Y	N		Daily caffeine		Y	N		Do you cook your meals?			Y	N			
Alcoholic drinks/week	0	1-2		3-5		>5		Tobacco/nicotine			Y	N		How much?		How often?										
Stress Levels	Work		0	1	2	3	4	5	6	7	8	9	10	Home		0	1	2	3	4	5	6	7	8	9	10
	Your condition		0	1	2	3	4	5	6	7	8	9	10	Situation		0	1	2	3	4	5	6	7	8	9	10
Family support	Y	N	Social Support		Y	N		Hobbies																		
Stress management & mindfulness practice:			Prayer		Meditation		Mindful breathing			Journaling		Time outside		Counseling		Exercise		Music								
Gratitude practice ?	Y	N	Do you feel in control of your life situation ?			Y	N		Do you believe that you can heal?			Y	N													
Occupation																										
Notes:																										
Family History (Did or does anyone in your family have the following diseases conditions, check all that apply.)																										
Arthritis					Diabetes								Heart Disease													
Autoimmune					Fibromyalgia								Lung Disease													
Blood Disorders					Gastrointestinal								Neurological													
Cancer					Genetic Disorders								Stroke													
Medical History																										
Motor Vehicle Accidents: (Date, Type, Injury & Treatment Received)																										
Work/Athletic Injuries -Slips & Falls : (Date, Type, Injury & Treatment Received)																										
Hospitalizations/Surgeries: (Date, Reason, Type of Surgery)																										
Review of Systems (C = Current P = Past N=Ne)																										
Neurological												Cognitive Function/Mental Health														
Migraines/Headaches		D,F,I,Q,S:										Anger/Irritability - Anxiety - ADD/ADHD - Depression - motivation/discipline														
Smells:		Hyper/Hypo sensitive - abnormal - nasal breathing difficulty:										Brain fog - Difficulty: Thinking - Concentrating - Judgement - Memory														
TMD/TMJ - Jaw Clicks - Bruxism - Difficulty Chewing - Swallowing - Clenching (L/R) -												Cardiovascular														
Teeth sensitivity:												Blood Pressure - Palpitations - Valve Defects - Ankle Swelling - Angina														
Speech Difficulty - Speech development - Bumblebee - Tater tot - Lollipop												Respiratory														
Dizziness/ Vertigo: (D,F,I,Q)												Asthma - Sleep Apnea - Snoring - COPD - Pneumonia - SOB - Allergies/Sinus														
Tinnitus (H/L) - Hearing loss - Hyperacusis:												Digestive														
Accommodation/Convergence - blurred vision - tunnel vision - diplopia - gaze												GERD - Food Sensitivities - Indigestion - Constipation - Diarrhea														
Tracking - difficulty reading - light sensitivity - floaters - poor night vision												Genitourinary														
Epilepsy - Seizures - Tremors - Tics:												Urination - Kidney Stones - Bladder - Pre/Post Menopause														
Decreased/Increased Sensation - Allodynia - Pins/Needles:												Menstrual Irregularities - Infertility - Pregnancy/Birth Complications - ED														
Musculoskeletal												Visceral Dysfunction														
Weakness - Lack of Coordination - Fine Motor Skill:												Liver - Spleen - Anemia - Blood disorder														
Osteoporosis - Joint Redness - Joint Stiffness - Scoliosis - Poor Posture:												Endocrine/Skin/Other														
Upper Extremity - Lower Extremity:												Sudden Weight Change - Thyroid - Trouble Sleeping - Hot Flashes														
												Acne - Rash/Hives - Moles - Blood Disorders - Cancer														