

Welcome to our office! It is well known that families who maintain strong healthy, well-aligned spines have much improved health. People whose spines are not kept in proper alignment are much more likely to develop health disorders later in life such as arthritis, illness, pain, heart attacks, strokes, even cancer.



Adult Chiropractic Health Questionnaire

Name		Home Phone	
Address		Work Phone	
City, State, Zip		Cell Phone	
Birth date	Age	SS#	
Occupation		Employer	
Marital Status: M W Sep. D Sin.	Spouse Name _	No. of Chi	ldren
E-mail Address			
		aring family member or friend. Wha	
☐ Telephone Call ☐ Yellow Pa	ages □ Sign	□ Website □ Presentation □	E-mail
2. Research shows that your spi visited a chiropractor in your lifeti		necked regularly. How many times h	nave you Never
3. When was your last complete	spinal examina	tion including x-rays? □	Never
·		al curvature, spinal arthritis, or inhe	•
5. Spinal misalignments cause d you ever hear noises when you n		neration which results in grinding or or neck?	cracking. Do
6. Spinal misalignments can mal back. Do you ever feel the need	-	you need to twist, stretch or crack your neck or lower spine?	our neck or YES NO
7. Poor posture leads to poor he your posture? Poor - 1 2 3		ndicates a spinal problem. How would be 10 - Excellent	uld you rate
8. Stress can cause or accelerat Low - 1 2 3	e spinal damag 4 5 6 7 8	e. Rate your stress level over the la 9 10 - High	ast 90 days.
9. Please list any health symptor	ms or health cor	mplaints you are experiencing.	
1	2	3	
10. Prescription medications may and hinder the body's ability to he		side effects, hide the severity of heactions are you currently taking?	alth problems
•		ious spinal problems. Is this visit re	
12. Spinal health is especially impregnant? ☐ YES ☐ NO	portant during p	regnancy. Is there any chance that	you are
13. Have you ever been diagnose	ed with cancer?	□ YES □ NO	
Type		Year	
14. If the doctor feels that chiropr recommendations? ☐ YES		ou, are you willing to follow his/her	
15. Would you like to receive our ☐ YES ☐ NO	weekly health a	and wellness newsletter via e-mail?	
The above information is true and	d accurate to the	e best of my knowledge.	
Patient Signature		Date	

Rev. 01-12-06