

Below are a list of diseases which may seem unrelated to the purpose of your appointment, however, these questions must be answered carefully, as these problems can affect your overall course of chiropractic care.

CHECK ANY OF THE FOLLOWING DISEASES YOU HAVE HAD:

- |  |  |  |  |   |
|--|--|--|--|---|
| <input type="checkbox"/> Pneumonia       | <input type="checkbox"/> Mumps         | <input type="checkbox"/> Influenza       | <input type="checkbox"/> Appendicitis  | <input type="checkbox"/> Measles          |
| <input type="checkbox"/> Rheumatic Fever | <input type="checkbox"/> Small Pox     | <input type="checkbox"/> Pleurisy        | <input type="checkbox"/> Scarlet Fever | <input type="checkbox"/> Thyroid          |
| <input type="checkbox"/> Polio           | <input type="checkbox"/> Chicken Pox   | <input type="checkbox"/> Arthritis       | <input type="checkbox"/> Diphtheria    | <input type="checkbox"/> Eczema           |
| <input type="checkbox"/> Tuberculosis    | <input type="checkbox"/> Diabetes      | <input type="checkbox"/> Epilepsy        | <input type="checkbox"/> Typhoid Fever | <input type="checkbox"/> Alcoholism       |
| <input type="checkbox"/> Whooping Cough  | <input type="checkbox"/> Cancer        | <input type="checkbox"/> Mental Disorder | <input type="checkbox"/> Malaria       | <input type="checkbox"/> Venereal Disease |
| <input type="checkbox"/> Anemia          | <input type="checkbox"/> Heart Disease | <input type="checkbox"/> Lumbago         | <input type="checkbox"/> Goiter        |   |

**CIRCLE CURRENT CONDITIONS - CHECK FORMER CONDITIONS**

**GENERAL SYMPTOMS**

- Tremors
- Headache
- Fever
- Chills
- Sweats
- Fainting
- Dizziness
- Convulsions
- Loss of Sleep
- Fatigue
- Nervousness
- Depression
- Loss of weight
- Numbness or pain in arms, hands, elbows, shoulders, hips, legs, knees or feet
- Paralysis
- Forgetfulness
- Confusion

**EYES, EARS, NOSE & THROAT**

- Failing vision
- Near sightedness
- Crossed eyes
- Eye pain
- Eye strain
- Eye inflammation
- Deafness
- Earache
- Ear noises
- Ear discharge
- Nose bleeds
- Nasal obstruction
- Sore throat
- Hoarseness
- Difficult speech
- Hay Fever
- Allergies
- Dental decay
- Gum troubles
- Frequent colds
- Enlarged thyroid
- Tonsillitis
- Sinus infection
- Nasal drainage
- Enlarged glands

**SKIN**

- Skin eruptions itching
- Itching
- Bruises easily
- Dryness
- Boils
- Rashes
- Sensitive skin
- Hives or allergy
- Eczema

**RESPIRATORY**

- Chronic cough
- Spitting up phlegm
- Spitting up blood
- Chest pain
- Difficult breathing
- Wheezing
- Pneumonia
- Tuberculosis
- Emphysema
- Whooping Cough
- Influenza
- Pleurisy
- Asthma

**CARDIO - VASCULAR**

- Rapid beating heart
- Slow beating heart
- High blood pressure
- Low blood pressure
- Pain over the heart
- Stroke
- Hardening of arteries
- Swelling of ankles
- Poor circulation
- Heart attack
- Varicose veins

**MUSCLE AND JOINT**

- Stiff neck
- Back ache
- Swollen joints
- Painful tail bone
- Foot trouble
- Pain between shoulders
- Hernia
- Spinal curvature (Scoliosis)
- Faulty posture

**MUSCLE AND JOINT CONT.**

- Arthritis
- Stiff joints
- Painful joints
- Sore muscles
- Weak muscles
- Walking problems
- Sciatica

**GENITOURINARY**

- Frequent urination
- Scanty urine
- Painful urination
- Blood in urine
- Pus in Urine
- Kidney infection or stones
- Bed wetting
- Inability to control urine
- Prostate trouble
- Bladder trouble
- Discolored urine

**GASTROINTESTINAL**

- Poor appetite
- Excessive hunger
- Difficult chewing
- Difficult swallowing
- Belching or gas
- Nausea
- Vomiting
- Vomiting of blood
- Pain over the stomach
- Distention of Abdomen
- Constipation
- Diarrhea
- Black stool
- Bloody stool
- Colon trouble
- Hemorrhoids (Piles)
- Intestinal worms
- Liver trouble
- Gall bladder trouble
- Jaundice
- Colitis
- Weight trouble
- Antibiotic therapy
- Appendicitis
- Ulcers

**GASTROINTESTINAL CONT.**

- Goiter
- Gout
- OTHER**
- Foot Orthotic / Supports
- Prosthesis
- Breast Implants
- FEMALE**
- Painful menstrual periods
- Excessive flow
- Hot flashes
- Irregular cycle
- Cramps or back ache
- Miscarriage
- Vaginal discharge
- Vaginal pain
- Breast pain
- Lumps in the breast
- Menopausal symptoms
- Abnormal bleeding

When was your last period?

Are you Pregnant:

- Yes
- No
- Not sure

**DO NOT WRITE BELOW THIS LINE**

CHIROPRACTIC ANALYSIS

Diagnosis: \_\_\_\_\_

Patient Accepted:  Yes  No

\_\_\_\_\_  
Doctor's Signature