



Please answer the following questions. Circle all that apply.

1. I am here because
 - A. I received gift certificate
 - B. I want to relax
 - C. I was referred by my doctor or Chiropractor
 - D. I am in pain
 - E. Other: _____
2. My pain level on a scale of 1-10 is a
1 2 3 4 5 6 7 8 9 10
3. For my pain I have seen
 - A. my Doctor
 - B. my Chiropractoron mo_____ day_____ yr_____
- C. I haven't seen anyone yet.
4. I have experienced this pain for how long? Days Weeks Months Years
5. It is due to
 - A. Car accident
 - B. Sporting injury
 - C. Stress
 - D. Tension
 - E. Disease
 - F. Work injury
 - G. Don't know
6. Does the pain keep you from sleeping at night? Y N
7. What have you done to treat your pain?
 - A. hot pack
 - B. ice pack
 - C. pain reliever
 - D. nothing
8. Pain worse or better after treatments? Worse Better
9. I have never been to a chiropractor but would be open to explore that option. Y N

We as massage therapists can not diagnose illness, disease, or any physical disorder. We can not prescribe medical treatment or pharmaceuticals. We can only make recommendations from our experience on steps that you can take to help you feel better.