

Name (First, MI, Last)

Date of Birth

Gender

Address

City

State

Zip Code

Email Address

Please note statements are sent via email and come from our electronic records system, the subject line will indicate from “PhysioPoint Therapy and Wellness- Patient Statement”

I have read the above statement.

How can we help you?

I would like the following people to have access to my medical records:

Emergency Contact: (Name and Phone #)

Referring Physician (If applicable)

Please list any physician you would like the results from your exam sent to:

Height (feet/inches)

Weight (lbs)

Where is your pain located?

Quality of Symptoms:

- Aching Burning Dull Sharp Numb
 Tingling Throbbing Constant Intermittent

What makes symptoms worse?

- Bending Stress Walking Lifting Squatting Standing
- Standing from Sitting Sitting Twisting Up Stairs Down Stairs
- Pushing Exercise Lying in Bed Coughing Sneezing
- Working Other

What makes symptoms better?

- Rest Sitting Medication Standing Activity Stretching
- Exercise Heat Elevation Ice Other

Other relevant symptom behavior:

On a scale of 0-10 (0 being no pain and 10 being the worst possible pain), what is your pain level?

Conditions

- Abuse/Trauma Asthma Allergies Current Infection Cardiovascular (Heart)
- Car Accident Cancer Diabetes (Type I) Diabetes (Type II)
- Dizziness/Vertigo Fibromyalgia` Fracture Gastrointestinal High Blood Pressure
- Immunosuppression Lung (Pulmonary) Osteoarthritis
- Osteoporosis Psychological Rheumatologic Skin Thyroid

Any other conditions:

Past surgeries:

Diagnostics:

- Mylogram X-ray Bloodwork CT EMG MRI

Results:

Medications, vitamins, supplements that you are taking (if any)

How many times have you fallen in the last 6 weeks?

- 0 1 2-5 6+

How did you hear about PHYSIOPOINT?

- Doctor Family/Friend Google Facebook Mail Event
- Other

Are you interested in any of our Wellness Programs?

- PNOE (Metabolic Testing)
- Sports Performance

I understand that if I have one of these insurances that they require a script/referral in order to be seen: Medicare, Medicaid, Workers Compensation

- I have read the above statement.