

Back^{to}Health

CHIROPRACTIC

Pediatric Consultation

Name: _____ Date: _____

DOB: ___/___/___ SSN: _____

The vast majority of our patients have experienced literally dozens of impacts that could cause subluxated vertebra. What I want to do now is discover several of your child's.

What was your child's birth like? _____

How long for entire labor? _____ How long did you actually push? _____

Were you induced? YES NO Nerve block? YES NO C-section? YES NO

Was there any pulling on the head? YES NO Forceps or vacuum extraction used? YES NO

47% of all children fall on their head by the age of one and they have at least 200 more major falls by the age of 5 years old.

When was (Name)'s most recent fall? _____

Was any care given? _____ Was s/he checked by a chiropractor? _____

And the fall before that? _____ Any care given? _____

What sports or recreational activities does s/he do? _____

When was (Name)'s most recent stress, strain, or injury while doing these activities? _____

Care given? _____

Has (Name) been involved in a motor vehicle accident as a passenger? YES NO

Briefly describe: _____

Any treatment? _____ Was s/he checked by a chiropractor? _____

These sound important. Thank you for explaining your (son/daughter's) history of accidents and traumas. This will help me better understand the case. What I want to do now if ask you a few questions regarding (Name)'s current health concerns.

Does s/he have health concerns? _____

If so, how long? _____

Subluxated vertebra can cause irritation to different fibers within nerves that can affect any organ or tissue, causing conditions NOW or in the future.

Are there any other conditions s/he is or was experiencing? _____

How long? _____

Any medications? _____