

VISUAL ACUITY:

Double vision	_____	_____
Blurred vision	_____	_____
Blind spots	_____	_____
Eye pain	_____	_____
Visual sensitivity to light	_____	_____
Poor night vision	_____	_____

HEARING:

Hearing loss	_____	_____
Ringing in ears	_____	_____
Sensitivity to sound	_____	_____

CARDIOVASCULAR / PULMONARY:

Breathing problems	_____	_____
Heart problems	_____	_____
Hypertension	_____	_____
Palpitations or tachycardia	_____	_____

GASTROINTESTINAL:

Nausea or vomiting	_____	_____
Stomach pain	_____	_____
Intestinal pain	_____	_____
Chronic constipation	_____	_____
Irritable bowel	_____	_____
Crohn's Disease	_____	_____

PAIN:

- Chronic pain or stiffness _____
- Headaches _____
- Chronic aching pain _____
- Chronic nerve pain (burning or stabbing) _____
- Muscle cramps _____

NEUROLOGICAL:

- Migraines _____
- Fainting _____
- Seizures _____
- Speech problems _____
- Tremor or spasticity _____
- Weakness _____
- Balance _____
- Coordination _____
- Accident prone _____
- Motor or vocal tics _____

ATTENTION AND COGNITIVE:

- Academic strengths and weaknesses _____
- Reading _____
- Math _____
- Art _____
- Sense of direction _____
- Concentration _____
- Memory _____
- Distractibility _____
- Impulsivity _____
- Hyperactivity _____

UROGENITAL SYSTEM:

Incontinence _____

PMS symptoms _____

Menopausal symptoms _____

Erectile Dysfunction _____

Sexual interest _____

HABITS:

Coffee use (# of cups per day) _____

Alcohol use (type and # of drinks per day) _____

Tobacco use (type and # per day) _____

Diet---anything unusual, recent changes, restrictions _____

Other drug use _____

BEHAVIOR / EMOTIONS:

Mood swings _____

Depression _____

Anxiety _____

Anger or aggression _____

Risk-taking behavior _____

Have you ever been diagnosed with, taken medication for, or think you may have:

Manic-depression _____

Panic attacks _____

Phobias _____

Obsessive-compulsive behaviors _____

Eating disorders _____

Addictions _____

Schizophrenia _____

PERSONAL HISTORY

Please check relevant data that apply to you. Please include any additional information about the disorder or historical circumstance such as age of onset, length of duration, interventions undertaken, that you consider important.

EARLY CHILDHOOD DEVELOPMENT:

Prenatal stress or injury	_____	_____
Prenatal drug exposure	_____	_____
Difficult labor	_____	_____
Difficult birth	_____	_____
Premature or late birth	_____	_____
Medical problems after birth	_____	_____
Adopted at age _____	_____	_____
Colic	_____	_____
Sleep problems	_____	_____
Eating problems	_____	_____
Activity level	_____	_____
Attachment difficulties	_____	_____
Emotional development	_____	_____
Motor development	_____	_____
Language development	_____	_____
Chronic ear infections	_____	_____
Allergies	_____	_____
Asthma	_____	_____

PHYSICAL TRAUMAS:

Head injury	_____	_____
Concussions	_____	_____

Accidents _____
High fever _____
Serious illness _____
CNS infection _____
Drug overdose _____
Poisoning _____
Anoxia _____
Stroke _____

SPORTS

Football _____
Soccer _____
Boxing _____
Martial Arts _____
Dance _____
Baseball _____
Track/Long Distance Running _____
Weight Lifting _____
Other (please specify) _____

History of Trauma & Stress:

Abuse or neglect _____
Family stress _____
School or job stress _____
Recent death in family _____
Illness _____

MEDICAL:

List medications, dosage and condition for which prescribed:

List any surgeries or medical procedures:

Family History: (Check all that apply and note relationship of family member)

Alcoholism or Drug Abuse _____

Asthma _____

Autoimmune Disorders: | Diabetes, Rheumatoid Arthritis Lupus, MS, Scleroderma, etc. _____

Thyroid disorder _____

Migraine _____

Sleep Problems _____

Depression _____

Phobias _____

Manic-depression _____

Anxiety _____

Panic Attacks _____

Motor or Vocal Tics _____

Seizures _____

Eating Disorders or Obesity _____

Addictions _____

Obsessive Compulsive Symptoms _____

Speech Problems _____

Attention Problems _____

Hyperactivity _____

Learning Problems

Conduct Problems or Criminal Behavior

Autism spectrum

Schizophrenia

Diabetes
