

CHIROPRACTIC PEDIATRIC HEALTH SCREENING

Please take a moment to answer the following questions that are designed to maximize your child's health. Many types of stress (physical, mental, chemical) can interfere with your child's growing spine and nervous system. Spinal health is an exciting new concept for many people, so please remember to ask questions.

Child's Name: _____ Age: _____ Parent's Name: _____
 Address: _____ Town: _____ Zip Code: _____
 Phone #: _____ Email: _____

1. Is your child currently benefiting from chiropractic care ? Yes No When was their last visit ? _____

2. **Circle Appropriately**
 Birth Place: Home / Hospital / Birth Center
 Type: Vaginal / C-Section
 Procedures: Forceps / Vacuum Extraction

3. **Circle Appropriately**
 Which contact sports does your child participate in ?
 Soccer / Football / Gymnastics / Karate / Hockey
 Basketball / Dance / Other _____

4. According to the National Safety Council, approximately 50% of infants fall head first from a high place (bed, changing table, etc.) during their first year of life. Has this happened to your child ? Yes No

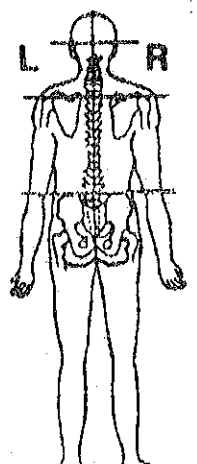

5. Check any of the following conditions your child has suffered from during the past six months:

<input type="checkbox"/> Ear Infections	<input type="checkbox"/> Scoliosis	<input type="checkbox"/> Seizures	<input type="checkbox"/> Chronic Colds	<input type="checkbox"/> Headaches
<input type="checkbox"/> Asthma/Allergies	<input type="checkbox"/> Digestive Problems	<input type="checkbox"/> ADHD	<input type="checkbox"/> Recurring Fevers	<input type="checkbox"/> Growing or Back Pains
<input type="checkbox"/> Colic	<input type="checkbox"/> Bed Wetting	<input type="checkbox"/> Car Accident	<input type="checkbox"/> Temper Tantrums	<input type="checkbox"/> Other _____

6. How many prescriptions of antibiotics has your child taken:
 During the past 6 months _____, Total During His/Her Lifetime _____

7. How many other prescription medications has your child taken:
 During the past 6 months _____, Total During His/Her Lifetime _____

A brief non-invasive spinal health screening will be performed to determine if your child has any functional or structural spinal problems. Spinal misalignments at an early age can cause nervous system stress (vertebral subluxation complex) that can interfere with your child's optimum health and immune function. Chiropractic care helps your child's growing spine and improves their health naturally.

FOR OFFICE USE ONLY																																																																																																																																					
Surface EMG	Thermal Scan DTG-NCM	Palpation	P-A Posture	Lat Posture	Other Comments																																																																																																																																
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Appointment Date: _____ Day: _____ Time: _____ Purpose: _____