

## New Patient Information Sheet

New Era Chiropractic would like to thank you for this opportunity to participate in your healthcare.

In order to quickly and accurately assess how we may assist you, it is essential that we gather some important information from you. The following pages contain a Personal Information Questionnaire and a Health History Questionnaire. These questionnaires are fairly detailed and may take 30 to 45 minutes to complete. All of the information we collect is strictly confidential and will not be released without your written authorisation.

### **Personal Information Questionnaire**

This form provides us with necessary information to contact you, your emergency contact as well as other healthcare professionals as may be required. It also provides us with information regarding your insurance cover and how and when we may contact you. Please sign and date this page.

### **Health History Questionnaire**

The health history is one of the greatest tools we have to assist us in resolving the issues you are presenting with today. We wouldn't ask for this information if it was not necessary or potentially related to your complaint. Please take the time to complete these sections fully.

**Page 1 – Current Complaint:** This section allows you to tell us what problems have brought you to seek our assistance today. There is space to address 3 problems. It is important to answer the questions as completely as possible to ensure we understand what the problem is, who you have already seen to help you with this matter and what procedures have been done to date and their effectiveness.

**Page 2 – Past Health History:** This page provides space to tell us about other problems you have encountered in the past; such as Motor Vehicle Accidents, Falls, Sporting Injuries, Illnesses etc. Please include the month and year of any imaging (x-ray, CT Scans or MRI Scans), blood and urine analysis. This page also includes space to provide details on past surgical procedures, allergies, medication and supplements you may be taking, Birth and Childhood information and Family history.

**Page 3 – Social and Work History:** This page provides information about your day-to-day activities at home, sport and work. This information is vital for us to assess what activities may be contributing to your major complaint but also provides a benchmark to measure improvement as care/treatment commences.

**Page 4 – Review of Systems:** This page is extremely important. It provides a snapshot of other issues you may have encountered which could be indicative of common or broader-based problems. Please tick the box to the left of any item if you are experiencing these items now or have experienced them in the past. Please sign and date this page.

### **What to Bring to Your 1st Appointment**

1. Completed and Signed Personal Information and Health History Questionnaires
2. **Any** imaging (x-ray, CT or MRI scans) with radiology reports
3. Current Health Cover Card(s)
4. Ladies should wear a 2-piece outfit to facilitate Spinal Scanning
5. Please arrive 10 minutes prior to your appointment time
6. Payment is Due on the Day of Service

**Please Note:** We require 24 Hours Notice to reschedule or cancel your initial consult.

We look forward to providing you with the personalised, specific and gentle care that you deserve. Thank you for choosing New Era Chiropractic.

Sincerely,

Dr. John M. Brubaker, D.C., B.C.A.O.  
Managing Director, New Era Chiropractic