Medical Questionnaire and Treatment Consent Form

Today's Date: _____ Name: _____

Address: _____

Home #:_____ Work #:_____ Cell #:_____

Date of Birth: Day_____ Month _____Year _____ Age: _____ Email:_____

Circle One: Injury/Surgery/Persistent Problem Date of Onset: _____

Emergency Contact Name: _____ Phone #:_____

What Medications are you currently taking?

_____

Do you currently have or had a history of **any** of the following medical condition(s)?

- ❑ Broken bones/fractures
- ❑ Osteoporosis
- ❑ Heart problems/Stroke
- ❑ High blood pressure
- ❑ Lung problems
- ❑ Diabetes
- ❑ Thyroid problems
- ❑ Cancer
- ❑ Pacemaker
- ❑ Metal Implants
- ❑ Seizures
- ❑ Hepatitis ABC
- ❑ Hernias
- ❑ Kidney problems
- ❑ Repeated Infections
- ❑ Skin diseases
- ❑ Depression
- ❑ Any surgeries_____
- ❑ Allergies_____
- ❑ Other: _____

Within the past year, have you had any of the following symptoms? (Please check all that apply)

- ❑ Chest pain
- ❑ Heart palpitations
- ❑ Shortness of breath
- ❑ Dizziness or blackouts
- ❑ Coordination problems
- ❑ Weakness in arms and legs
- ❑ Loss of balance
- ❑ Increased Pain at Night
- ❑ Loss of appetite
- ❑ Nausea/vomiting
- ❑ Difficulty swallowing
- ❑ Bowel problems
- ❑ Weight loss/gain
- ❑ Urinary problems
- ❑ Fever/chills/sweats
- ❑ Double vision

Do you currently smoke? ❒Yes ❒No Have you ever taken steroids? e.g. prednisone ❒Yes ❒No

Family Doctor's Name: _____

CANCELLATION AND MISSED APPOINTMENTS

We book off **specific** time in **our** schedule to see you. If you miss your appointment or cancel last minute than this not only affects your rehabilitation progress but also affects our physiotherapist's schedules and other patient's rehabilitation progress who could have been seen during that appointment slot. We require **1 DAYS NOTICE** if you are unable to attend a scheduled appointment. Missing an appointment or "last minute" cancellations can result in a missed appointment fee of $60. If you have any questions regarding this policy please ask us.

RESPONSE TO PHYSIOTHERAPY TREATMENT

At Kensington Physiotherapy we encourage honest and open dialogue with our patients. Some treatments and exercise programs can result in temporary discomfort. This is normal and part of the healing process. If you have any questions or concerns about your symptoms, care or progress at Kensington Physiotherapy, please tell us. You can call us anytime. We want to help and make sure you do well.

NEW PATIENTS ARE WELCOME!

We accept new patients and no doctors referral is necessary! If you know a family member or friend who is suffering from pain we can help. Feel free to give them a business card (at front desk) or let them know they can call us for a free phone consultation to see if physiotherapy would benefit them.

Please Like + Share our Facebook Page! Google and Facebook Reviews Are Appreciated!

To my knowledge, the information I have disclosed above is accurate. I have read, understand and agree to the policies of Kensington Physiotherapy. **Consent for Treatment**: I agree to be assessed and treated by Kensington Physiotherapy rehabilitation staff.

_____
Signature

ACUPUNCTURE CONSENT

Acupuncture is a therapeutic method used to encourage healing, reduce or relieve pain and improve function of affected areas of the body. Acupuncture involves the insertion of very fine needles through the skin and tissues at specific points on the body.

Potential Benefits and Risks of Acupuncture

Acupuncture can reduce pain and symptoms, induce an anti-inflammatory effect and improve general health. Although acupuncture is considered to be a safe treatment with minimal discomfort and generally no adverse effects, there are potential risks that must be discussed. Potential complications from acupuncture include post needle insertion pain, minor bruising, infection, a broken needle, temporary skin discoloration, weakness, fainting, nausea or an aggravation of pre-existing symptoms.

Infection Control

Kensington Physiotherapy follows universally prescribed precautions to guard against the spread of infection. Kensington Physiotherapy uses only sterilized, prepackaged, disposable needles. Needles used for treatment are used only once on each patient and are inserted according to nationally adopted procedures and standards.

Contraindications To Acupuncture: Pregnancy and Haemophilia

Consent

- I recognize the potential benefits and risks associated with acupuncture.
- To my knowledge, I do not have any of the above listed contraindications for acupuncture.
- I am to notify the treating physiotherapist immediately if my general health changes or if I have any questions or concerns while receiving acupuncture treatments.
- I am providing voluntary consent to receive acupuncture treatment as part of my physiotherapy care at Kensington Physiotherapy.

Signature of Patient _____ Date _____