Hessler Chiropractic 279 W Capac Road Imlay City, MI 48444 P: (810) 724-0596 F: (810) 724-2247 Hesslerchiro.com

Hessler Chiropractic Patient Symptoms and Conditions

Patient Name	Date
Do you now have or have you ever had?	Please check all that apply.
ALLERGIC-IMMUNOLOGIC: ☐ Hives/Eczema ☐ Hay ☐ Frequent influenza ☐ HIV ☐ AIDS ☐ Allergies ☐ F	·
☐ Heart attack ☐ Irregular heartbeat ☐ Pressure ov	oitations □ Dizziness □ Shortness of breath □ Swollen ankles er the chest □ Pain down the left arm □ High triglycerides usea □ Vomiting □ Low blood pressure □ Fainting spells
CONSTITUTIONAL: ☐ Weight loss ☐ Fatigue ☐ Feve	r
EAR/NOSE/THROAT: ☐ Difficulty hearing ☐ Buzzing ☐ Nasal stuffiness ☐ Hearing loss ☐ Ear pain ☐ Mod ☐ Frequent sore throat ☐ Difficulty swallowing	g in ears □ Ringing in ears □ Vertigo □ Sinus trouble uth sores □ Hoarseness □ Nose bleeds □ Dental problem
ENDOCRINE: \square Loss of hair \square Heat/Cold Intolerance	e □ Hypothyroidism □ Hyperthyroidism □ Diabetes □ Goiter
EYES: \square Glasses/Contacts \square Eye pain \square Light bothe \square Blurred vision \square Glaucoma	ers eyes Double vision Cataracts Vision problems
☐ Black or bloody BM ☐ Gallbladder problem ☐ Live	a/Vomiting □ Constipation □ Change in BMs □ Diarrhea er problem □ Hepatitis □ Distress from greasy food □ Ulcers ne stool □ Colon cancer □ Abdominal pain □ Burning in stomach Mucus in stool
GENITOURINARY: $□$ Burning/Frequency $□$ Blood in $□$ Incontinence $□$ Kidney infection $□$ Sexual difficul	urine ☐ Erectile dysfunction ☐ Abnormal discharge ☐ Leakage ty ☐ Kidney stones ☐ Loss of libido
HEMATOLOGY/LYMPH: $□$ Easy bruising $□$ Gums ble $□$ Sickle cell anemia $□$ Lymphoma	eed easily □ Enlarged glands □ Anemia □ Bleeding disorder
☐ Osteoarthritis ☐ Rheumatoid arthritis ☐ Bone spu☐ Back injury ☐ Spinal trauma ☐ Birth trauma ☐ Birth	ess Muscle pain Neck pain Stiff neck Back pain urs Broken bones Compression fracture Head injury rth defects Cancer Muscle weakness Muscular dystrophy na bifida Spondylolisthesis Arthritis Neck injury

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NEUROLOGICAL: ☐ Loss of strength ☐ Numbness ☐ Headaches ☐ Heavy head ☐ Tremors ☐ Memory loss ☐ Difficulty speaking ☐ Multiple sclerosis ☐ Parkinson's disease ☐ Fainting ☐ Concussion ☐ Migraines ☐ Disorientation ☐ Loss of coordination ☐ Difficulty in walking ☐ Stroke ☐ Alzheimer's disease ☐ Weakness ☐ Disk problem ☐ Light Headed/Dizzy ☐ Epilepsy/Seizure ☐ Tingling
$\underline{\textbf{PSYCHIATRIC:}} \ \Box \ \textbf{Anxiety} \ \Box \ \textbf{Depression} \ \Box \ \textbf{Mood swings} \ \Box \ \textbf{Difficult sleeping} \ \Box \ \textbf{Nervousness} \ \Box \ \textbf{Tension}$
RESPIRATORY: □ Cough □ Coughing blood □ Wheezing □ Chills □ Chronic cough □ Pneumonia □ Asthma □ Superficial breathing □ Chest pain □ Tuberculosis □ Bronchitis □ Emphysema □ Difficulty breathing □ Lung cancer
SKIN: □ Rash/Sores □ Lesions □ Itching/Burning □ Skin problem □ Slow healing □ Bruise easily □ Psoriasis □ Change in moles □ Change in skin color □ Skin cancer □ Scars □ Discolorations
WOMEN'S HEALTH ISSUES: ☐ Hot flashes ☐ Vaginal discharge ☐ Nipple discharge ☐ Menstrual cramps ☐ Premenstrual depression ☐ Lumps in breast ☐ Hysterectomy
The date of last mammogram test was/ Mammogram is normal Mammogram is abnormal
The date of last pap test was/ \square Pap is normal \square Pap is abnormal
The age of onset for periods was □ Periods are regular □ Periods are irregular
The age of onset for menopause was Number of pregnancies
GENERAL: □ Recent weight gain □ Loss of sleep □ Recent weight loss □ Loss of appetite □ Fatigue □ Polio □ Rheumatic fever □ Cancer of any kind □ Metal Rods □ Pins □ Screws □ Staples □ Any type of Metal Beneath Skin
OTHER: