Today's Date:	6
PATIENT INFORMATION	
Child's First Name:	Last Name:
Reason for Visit:	
Sex: M / F Date of Birth:	Age: Child's SS#:
Home Phone #:	
Home Address:	
Who may we thank for referring you?	
FAMILY INFORMATION	
Mother's Name:	Father's Name:
Does one or both parents have custody?	
Home Phone #:	Home Phone #:
Work Phone #:	Work Phone #:
Parent's Marital Status: Married Single	DivorcedWidowed
List Ages of Other Children in Family:	
PAYMENT INFORMATION	
Please read and sign our Financial Agreement. Doc	es your health insurance cover chiropractic? Y/N
If you have health insurance that may cover chiropcopy. Additionally, please enter the following inforinsurance coverage.	practic care, please provide your current insurance card so that rmation relating to the person who is responsible for the child's
Insured's Name:	DOB:SS#:
Insurance Company Name:	Phone #:
Insurance Company address to send claims:	
Employer:	Group # Insured's ID #:
CONSENT FOR CHIROPRACTIC	CARE
Being the parent or legal guardian of this child, I have my son/daughter (name)	nereby authorize this office and its doctors to examine and adm _as the doctor deems necessary.
Tundenstand and some that Tam personally respo	ensible for payment of all fees charged by this office for such c





PEDIATRIC HISTORY

ANSWER THE QUESTIONS THAT APPLY TO THE GROWTH AND DEVELOPMENT OF YOUR CHILD.

					08-
(C)	Yes	No —	Was this child born at home?		
192			Were forceps or a vacuum extractor use	d? C-Section delivery?	Breech delivery?
CONTRACTOR OF THE PARTY OF THE			Can your child sit unsupported?		Breech delivery/disters
· 6785681			Is your child crawling yet?		를 당한
90			Is your child walking yet? At what age of	did your child start to walk? Months	
(8.80)			Have you noticed a foot turned in or out	?	
(Chighten			Do you have any other concerns about yo	our child's growth & development?	
90	HEAL	тн нт.	ISTORY		
(B.B.D)	Yes	No	Has your child any health problems? I	nfections?	
(C)					
رمعاص	-			dications?	
1898(8)	_			Any Reac	
9.4	EAMT		ISTORY		
S. C.				LIFE STYLE INFORMATION	
enfect.	Do yo	No No	e a family history of:	DIET	
90		_	Heart trouble Cancer	Breast feeding this child?	Are you bottle feeding this child?
(B)B(B)			Nervous conditions Depression	What is his/her favorite food?	What foods does she/he dislike?
369	_	_	Inherited disease		
CONTRACTOR OF THE PARTY OF THE	Explo	ain	The state of the s	SLEEPING HABITS Any problems with bed-time?	
(D) (B) (B)					Hours total
00			Decembly Consend		Date
			raremy Buarui		
Street and the	Contract of the Contract of th	A straight		ART CAN THE COURT OF ALL COMPANIES OF THE PARTY.	
EXAN	INA"	TIO			以 1911年 - 191
INFA	NT		CHIROPR	ACTIC EXAMINATION	
INFA Cry_	NT		CHIROPR	Palpation/Posture Analysis	Radiographic/Posture Study
INFA Cry Skin co	NT lor, to	ne	CHIROPR	ACTIC EXAMINATION	Radiographic/Posture Study
INFA Cry_ Skin co Size (w Body p	NT lor, to reight '	ne WNL ions _	Or below?)	Palpation/Posture Analysis	Radiographic/Posture Study
INFA Cry Skin co Size (w Body p Nutrit	NT lor, to reight ' roporti	ne WNL ions _ tatus :	Or below?)	Palpation/Posture Analysis	Radiographic/Posture Study
INFA Cry Skin co Size (w Body p Nutrit	NT lor, to reight ' roporti	ne WNL ions _ tatus :	Or below?)	Palpation/Posture Analysis	Radiographic/Posture Study Cervical
INFA Cry Skin co Size (w Body p Nutrit Symme	lor, to reight ' roporti onal st try	ne _ WNL ions _ tatus	or below?)	Palpation/Posture Analysis	Radiographic/Posture Study Cervical Skull Position Anterior Translation (AST)MM
INFA Cry Skin co Size (w Body p Nutrit Symme	lor, to reight ' roporti onal st ttry DUS SY ROM Nor	ne WNL ions _ tatus ; YSTE	or below?)	Palpation/Posture Analysis	Radiographic/Posture Study Cervical Skull Position Anterior Translation (AST) Posterior Translation (PST) MM Cervical Curve Normal Normal
INFA Cry Skin co Size (w Body p Nutrit Symme NERVO Joint F	ior, to reight ' roporti onal st try DUS SY ROM Nor Spa	me WNL ions _ tatus YSTE	or below?)	Palpation/Posture Analysis DATE	Radiographic/Posture Study Cervical Skull Position Anterior Translation (AST)MM Posterior Translation (PST)MM Cervical Curve Normal
INFA Cry Skin cc Size (w Body p Nutrit Symme NERVC Joint F	lor, to reight to report to real start try	me WNL ions _ tatus : YSTE rmal _ asticit	or below?)	Palpation/Posture Analysis DATE	Radiographic/Posture Study Cervical Skull Position Anterior Translation (AST) MM Posterior Translation (PST) MM Cervical Curve Normal Hypoloraosis Hyperlordosis Thoracic Spine
INFA Cry Skin cc Size (w Body p Nutrit Symme NERV(Joint F Gentle ity or	lor, to reight to report to onal state on the state of th	me	or below?) W y/ Flaccidity ould produce movement or withdrawal of ession. Findings: appears at 3/4 months. Absence before is indicative	Palpation/Posture Analysis DATE extrem- extrem-	Radiographic/Posture Study Cervical Skull Position Anterior Translation (AST) Posterior Translation (PST) MM Cervical Curve Normal Hypolonoosis Hyperlordosis
INFA Cry Skin cc Size (w Body p Nutrit Symme NERVO Joint F Gentle ity or Rooting generali	lor, to reight ' reporti onal st try DUS SY ROM Nor Spa stroki facial e	wne WNL ions _ tatus _ ySTE rmal _ isticit ing sh expres	or below?) M y/ Flaccidity ould produce movement or withdrawal of ession. Findings: appears at 3/4 months. Absence before is indicative nervous system disease). Findings:	Palpation/Posture Analysis DATE extrem- extrem-	Radiographic/Posture Study Cervical Skull Position Anterior Translation (AST)MM Posterior Translation (PST)MM Cervical Curve NormalHypoloraosisHyperlordosis Thoracic Spine A-P Lateral Lumbar Spine
INFA Cry Skin cc Size (w Body p Nutrit Symme NERVC Joint F Gentle ity or Rootin generali Galant detecte	lor, to reight 'roporti onal statry	ne	CHIROPR or below?) M y/ Flaccidity ould produce movement or withdrawal of ession. Findings: appears at 3/4 months. Absence before is indicative nervous system disease). Findings: sappears at 2 months. Transverse cord lesions may blex) Stroke along paravertebral line. Should produce	Palpation/Posture Analysis DATE extrem- extre	Radiographic/Posture Study Cervical Skull Position Anterior Translation (AST)MM Posterior Translation (PST)MM Cervical Curve Normal Hypoloroosis Hyperlordosis Thoracic Spine A-P Lateral
INFA Cry Skin cc Size (w Body p Nutrit Symme NERVC Joint F Gentle ity or Rootin generali Galant detecte trunk to	lor, to reight 'roporti onal statry	nne	CHIROPR or below?) M y/ Flaccidity ould produce movement or withdrawal of ession. Findings: appears at 3/4 months. Absence before is indicative nervous system disease). Findings: sappears at 2 months. Transverse cord lesions may blex) Stroke along paravertebral line. Should produce ed side. Finding:	Palpation/Posture Analysis DATE extrem- e of severe c curve of	Radiographic/Posture Study Skull Position Anterior Translation (AST)MM Posterior Translation (PST)MM Cervical Curve Normal Hypoloroosis Hyperlordosis Thoracic Spine A-P Lateral Pelvis Pelvis
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INFA Cry Skin cc Size (w Body p Nutrit Symme NERVC Joint F Gentle ity or Rootingenerali Galant detecte trunk to Moro s disease. one or b	lor, to reight to reight to reportional st try DUS SY ROM Nor Spa stroki facial e g Refle zed or co s Refle d using t words st tign (St Low spir oth legs	me	CHIROPR or below?) M y/ Flaccidity ould produce movement or withdrawal of ession. Findings: appears at 3/4 months. Absence before is indicative nervous system disease). Findings: sappears at 2 months. Transverse cord lesions may blex) Stroke along paravertebral line. Should produce ed side. Finding: eflex. Persistence beyond 4 months may indicate nearly & dislocation of the hip may produce absence of lings:	Palpation/Posture Analysis DATE extrem- e of severe be a curve of urologic response in	Radiographic/Posture Study Cervical Skull Position Anterior Translation (AST)MM Posterior Translation (PST)MM Cervical Curve NormalHypoloraosis Hyperlordosis Thoracic Spine A-P Lateral Pelvis A-P Greater Trachanters (RT) (LT)
INFA Cry Skin cc Size (w Body p Nutrit Symme NERVC Joint F Gentle ity or Rootin generali Galant detecte trunk to Moro s disease. one or b Babins	lor, to reight 'roporti onal statry	ne	CHIROPR or below?) M y/ Flaccidity ould produce movement or withdrawal of ession. Findings: appears at 3/4 months. Absence before is indicative nervous system disease). Findings: sappears at 2 months. Transverse cord lesions may blex) Stroke along paravertebral line. Should produce ed side. Finding: eflex. Persistence beyond 4 months may indicate nearly & dislocation of the hip may produce absence of	Palpation/Posture Analysis DATE extrem- extrem- extrem- cof severe core curve of coresponse in	Radiographic/Posture Study Skull Position Anterior Translation (AST)MM Posterior Translation (PST)MM Cervical Curve NormalHypoloraosisHyperlordosis Hyperlordosis Thoracic Spine A-P Lateral Pelvis Pelvis A-P Greater Trochanters (RT)