NEW PATIENT INTAKE FORM

DATE

NAME BIRTHDATE

ADDRESS TELEPHONE
MOBILE

EMAIL EMERGENCY CONTACT

REFERRED BY

REASON FOR VISIT TODAY

HOW LONG HAVE YOU HAD THIS CONDITION?

IS IT GETTING WORSE?

WHAT WAS THE INITIAL CAUSE?

WHAT MAKES IT BETTER?

PAST MEDICAL HISTORY

- ❑ ALLERGIES_____

Please list any significant illnesses, conditions, hospitalizations, surgeries

Please list all current medications and supplements with reason for taking

HAVE YOU EATEN TODAY?
HAVE YOU HAD CAFFEINE TODAY?

longevity acupuncture
1122 Third Street, Suite 3
Neptune Beach, Florida 32266
(904) 701-2830

NEW PATIENT INTAKE FORM

Name_____ Pg2

PLEASE CIRCLE ANY OF THE SYMPTOMS EXPERIENCED BELOW

low energy/fatigue	poor sleep	night sweats	lack of strength
shortness of breath	asthma	sweat easily	fever
cough	cold hands/feet	bleed easily	chills
muscle cramps	dizziness	bruise easily	poor appetite
wear glasses/contacts	blurred vision	eye pain	glaucoma
cataracts	tooth problem	mouth sores	sore throat
headaches	facial pain	grinding teeth	nose bleeds
migraines	concussion	sinus problems	ringing in ears
high blood pressure	fainting	chest pain	heart palpitations
low blood pressure	blood clots	atherosclerosis	irregular heartbeat
nausea	vomiting	gas	acid reflux
hiccups	diarrhea	constipation	intestinal pain
bad breath	hemorrhoids	laxative use	mucous in stool
bloating	blood in stool	itchy anus	black stool
urinary pain	urgent urine	blood in urine	unable to hold urine
kidney stone	genital herpes	genital warts	bedwetting
rashes	hives	eczema	dandruff
ulcerations	acne	psoriasis	hair loss
numbness	seizures	tics	depression
poor memory	easily stressed	anxiety	irritability
neck pain	upper back pain	arm pain	hand pain
shoulder pain	low back pain	leg pain	foot pain
painful periods	irregular periods	breast lumps	breast pain
PMS	heavy flow	vaginal discharge	menopause
#live births_____	cysts	endometriosis	PCOS

OTHER

longevity acupuncture
1122 Third Street, Suite 3
Neptune Beach, Florida 32266
(904) 701-2830