

# Health First Chiropractic Clinic

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## Personal Injury/Auto Accident

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_

### 1. SYSTEM REVIEW Place an (x) next to systems that apply.

#### **Genito-Urinary System**

- |   |  |
|---|--|
| <input type="checkbox"/> bladder trouble      | <input type="checkbox"/> excessive urination |
| <input type="checkbox"/> scant urination      | <input type="checkbox"/> painful urination   |
| <input type="checkbox"/> discolored urination |  |

#### **Gastro-Intestinal System**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> poor appetite        | <input type="checkbox"/> excessive hunger | <input type="checkbox"/> difficult chewing    |
| <input type="checkbox"/> difficult swallowing | <input type="checkbox"/> excessive thirst | <input type="checkbox"/> nausea               |
| <input type="checkbox"/> vomiting food        | <input type="checkbox"/> abdominal pain   | <input type="checkbox"/> diarrhea             |
| <input type="checkbox"/> constipation         | <input type="checkbox"/> black stool      | <input type="checkbox"/> bloody stool         |
| <input type="checkbox"/> hemorrhoids          | <input type="checkbox"/> liver trouble    | <input type="checkbox"/> gall bladder trouble |
| <input type="checkbox"/> weight trouble       |   |   |

#### **Nervous System**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> numbness       | <input type="checkbox"/> loss of feeling | <input type="checkbox"/> paralysis     |
| <input type="checkbox"/> dizziness      | <input type="checkbox"/> fainting        | <input type="checkbox"/> headaches     |
| <input type="checkbox"/> muscle jerking | <input type="checkbox"/> convulsions     | <input type="checkbox"/> forgetfulness |
| <input type="checkbox"/> confusion      | <input type="checkbox"/> depression      |  |

#### **Cardiovascular System**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> chest pain       | <input type="checkbox"/> pain over heart     | <input type="checkbox"/> difficult breathing |
| <input type="checkbox"/> persistent cough | <input type="checkbox"/> coughing phlegm     | <input type="checkbox"/> coughing blood      |
| <input type="checkbox"/> rapid heartbeat  | <input type="checkbox"/> high blood pressure | <input type="checkbox"/> heart problems      |
| <input type="checkbox"/> lung problems    | <input type="checkbox"/> varicose veins      | <input type="checkbox"/> other               |

#### **Eye, Ear, Nose, and Throat System**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> eye strain        | <input type="checkbox"/> eye inflammation | <input type="checkbox"/> vision problem |
| <input type="checkbox"/> ear pain          | <input type="checkbox"/> ear noises       | <input type="checkbox"/> ear discharge  |
| <input type="checkbox"/> hearing loss      | <input type="checkbox"/> nose pain        | <input type="checkbox"/> nose bleeding  |
| <input type="checkbox"/> sore mouth        | <input type="checkbox"/> sore throat      | <input type="checkbox"/> sore gum       |
| <input type="checkbox"/> speech difficulty | <input type="checkbox"/> dental problems  |   |

## **2. DAILY LIFE (ACTIVITIES)**

### **Pain Intensity**

- Pain killers give no relief from pain and patient doesn't use them
- Pain killers give very little relief from pain
- Pain killers give moderate relief from pain
- Pain killers give complete relief from pain
- The pain is so bad but patient manages without pain killers
- Patient can tolerate the pain without any pain killers

### **Washing, Dressing, ETC, (Personal Care)**

- Patient does not get dressed, washes with difficulty, and stays in bed
- Patient needs some help every day in most aspects of self-care
- Is difficult for patient to look after self and is slow and careful
- Patient can look after self normally but it causes extra pain
- Patient can look after self normally without it causing extra pain

### **Sex Life**

- Pain prevents any sex at all
- Patient's sex life is nearly absent due to pain
- Patient's sex life is severely restricted due to pain
- Patient's sex life is nearly normal but is very painful
- Patient's sex life is normal but causes some extra pain
- Patient's sex life is normal and causes no extra pain

### **Sleeping**

- Pain prevents patient from sleeping at all
- Even when patient takes tablets gets less than 2 hours sleep
- Even when patient takes tablets gets less than 4 hours sleep
- Patient can only sleep well by using tablets
- Pain does not prevent patient from sleeping well

### **Sitting**

- Pain prevents patient from sitting at all
- Pain prevents patient from sitting for more than 10 minutes
- Pain prevents patient from sitting for more than 30 minutes
- Pain prevents patient from sitting for more than 60 minutes
- Patient can only sit in his/her chair as long as desires
- Patient can sit in any chair as long as desires

### **Lifting**

- Patient cannot lift or carry anything at all
- Patient can lift only very light weights
- Pain prevents patient from lifting heavy weights, but can manage light to medium weights if they are conveniently positioned
- Pain prevents patient from lifting heavy weights off the floor, but can manage if they are conveniently positioned (on a table)
- Patient can lift heavy weights but it causes extra pain
- Patient can lift heavy weights without extra pain

**Walking**

- Patient in bed most of time and has to crawl to toilet
- Patient can only walk using a cane or crutches
- Pain prevents patient from walking more than a short distance
- Pain prevents patient from walking more than ¼ mile
- Pain prevents patient from walking more than ½ mile
- Patient can walk as long as desired without extra pain

**Standing**

- Pain prevents patient from standing at all
- Pain prevents patient from standing for more than 10 minutes
- Pain prevents patient from standing for more than 30 minutes
- Pain prevents patient from standing for more than 60 minutes
- Patient can stand as long as desired but it causes extra pain
- Patient can stand as long as desired without extra pain

**Social Life**

- Patient has no social life because of pain
- Pain has restricted patient’s social life to his/her home
- Pain has restricted patient’s social life and does not go out as often
- Pain has no significant effect on patient’s social life apart from limiting him/her more energetic interests (dancing, etc.)
- Patient’s social life is normal but increases degree of pain
- Patient’s social life is normal and gives him/her no extra pain

**Traveling**

- Pain restricts patient from traveling except to doctor or hospital
- Pain restricts patient to short, necessary trips under 30 minutes
- Pain restricts patient to journeys less than 1 hour
- Pain is bad but patient manages journeys over 2 hours
- Patient can travel anywhere but it gives him/her extra pain
- Patient can travel anywhere without extra pain

**3. PATIENT’S PAIN LEVEL: Circle**

Critical Pain: 10      Intense Pain: 9 8 7      Moderate Pain: 6 5 4  
 Mild Pain: 3 2 1      Normal: 0

**4. PUT (X) WHERE IT HURTS**

**Spine**

- Low Back                       Mid Back                       Neck                       Pelvis

**Upper Extremity**

- Shoulder R/L                       Arm R/L                       Elbow R/L
- Wrist R/L                       Forearm R/L                       Hand R/L

**Lower Extremity**

- Hip R/L                       Thigh R/L                       Knee R/L
- Leg R/L                       Ankle R/L                       Foot R/L

**Patient’s Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

