

Welcome to Dr Kori - Chiropractic the office of Kori Mortenson, DC

Please print clearly and fill in completely.

Name: _____ Email: _____

Address: _____ City: _____ State: _____ Zip code: _____

Home phone: _____ Cell: _____ Work: _____

Date of birth: _____ Referred by: _____

Personal & Family History

Your Occupation: _____ Work duties: _____

Name of spouse: _____

Number of children, Names and ages: _____

Hobbies & Interests (what you do for fun?): _____

Chiropractic History

Have you ever been to a chiropractor before? ___ Yes ___ No

If yes, who and when? _____

Are other family members under chiropractic care? ___ Yes ___ No

Health History

What is your reason for coming in today? _____

Is there anything about your spine & nerve system that would be important for me to know?

Getting to Know Chiropractic

Were you aware that:

- ...Chiropractors work with the nerve system? ___ Yes ___ No
- ...the nerve system controls all body functions and systems? ___ Yes ___ No
- ...with regular chiropractic adjustments, you can achieve a higher level of health throughout life? ___ Yes ___ No

Goals for my care

- I have a symptom and I am only interested in relief from it
- I have a symptom of a physical problem and I want to see if chiropractic will enable my body to work better. I am also interested in learning about the role of chiropractic in improving my expression of life and that of my family.
- I have no special problem; I understand the role of chiropractic in my general well-being.

Dr. Kori Mortenson has been trained extensively in the chiropractic profession and should not be confused with being a medical physician. The goal in this practice is to enhance the function and integrity of your nerve system, not to diagnose, treat, or cure physical, mental, or emotional ailments. We witness "miracles" every day, but it is important to understand that if you become concerned about symptoms or medical conditions, we suggest that you seek the help of a symptom and disease care professional.

I, the undersigned, have completely read and understand the above statement and choose to be served at the Office of Dr. Kori Mortenson.

Signature

Date