

New Patient Health History Form

Date:

PATIENT INFORMATION Name:	CONTACT INFORMATION Home Phone: Mobile Phone: Email: EMERGENCY CONTACT Name: Mobile Phone: REFERRAL INFORMATION How did you hear about our office?	
Allergies: CURRENT PATIENT CONDITION Is this complaint related to an accident?		
When and how did your symptoms begin: Have you had this before? Explain:		
Is your condition getting progressively:	Evening — — — — — — — — — — — — — — — — — — —	
Family History: Family members present or past health diabetes, cancer, etc.): Are you currently receiving health care for any other results that the you ever had any X-rays taken or other special im Are you on any medication/supplements now or previous taken or other special im Are you ever had a surgery / if yes, what surgery? Have you ever suffered from joints/muscles/bones/spi	eason? naging such as MRI or CT Scan? ously? inal condition?	

INFORMED CONSENT



It is important for you to consider the benefits, risks and alternatives to the treatment options offered by our Family and Sports Medicine Specialist, Chiropractor, Physiotherapist, Sports Therapists and Kinesiologists in order to make an informed decision about proceeding with treatment.

Family and Sports Medicine, Chiropractic, Physiotherapy, Sports Therapy and Kinesiology services include diagnostic procedures, joints and spine manipulation and mobilization, soft tissue techniques such as massage, and other forms of therapy including, but not limited to dry needling, electrotherapeutic modalities, exercise and prescribing medication.

Benefits

Family and Sports Medicine, Chiropractic, Physiotherapy, Sports Therapy and Kinesiology treatments have been demonstrated to be effective for pain complaint of the neck, back and other areas of the body caused by injury to the nerves, muscles, joints, tendons, ligaments and fascia. Treatment by your Sports Medicine Specialist, Chiropractor, Physiotherapist, Sports Therapists and Kinesiologists can relieve pain, including headache, altered sensation, muscle stiffness and spasm. It can also increase mobility, improve function, and reduce or eliminate the need for drugs or surgery.

Risks

You also must be informed that there are or may be some risks associated with such treatments. In particular:

- **Temporary worsening of symptoms:** Muscle soreness occurs in up to half of patients following treatment and usually dissipates within a couple of days. Although rare, some patients have experienced muscle strain, ligament sprain or rib fracture following manual therapy. Usually, any increase in pre-existing symptoms of pain or stiffness will last only a few hours to a few days. Please consult your provider for questions on management.
- Skin irritations, burn or bruising: Skin irritation, a burn or bruising may occur in association with the use of some types of soft tissue therapies and electrotherapeutic modalities. Skin irritation can be caused by the use of tape (contact with the glue). Skin irritation should resolve quickly. A burn may leave a permanent scar. Bruising may be cause by dry needling, deep tissue therapy and cupping therapy and should resolve in a few days.
- **Sprain or strain**: Typically, ligament sprain or muscle strain will resolve itself within a few days or a few weeks with some rest, protection of the area affected and other minor care.
- Injury or aggravation of a disc: Over the course of a lifetime, spinal discs may degenerate or become damaged. A disc can degenerate with aging and daily wear and tear with common daily activities such as bending or lifting. Patients who already have a degenerated or damaged disc may or may not have symptoms. They may not know they have a problem with a disc. They also may not know their disc condition is worsening because they only experience back or neck problems once in a while.
 - Chiropractic, Physiotherapy, Sports Therapy and Kinesiology treatment should not damage a disc that is not already degenerated or damaged, but if there is a pre-existing disc condition, the treatment, like many common daily activities, may aggravate the disc condition.
 - The consequences of disc injury or aggravating a pre-existing disc condition will vary with each patient. In the most severe cases, patient symptoms may include impaired back or neck mobility, radiating pain and numbness into the legs or arms, impaired bowel or bladder function, or impaired leg or arm function.
- **Stroke**: Blood flows to the brain through two sets of arteries passing through the neck. These arteries may become weakened and damaged, either over time through aging or disease, or as a result of injury. A blood clot may form in a damaged artery. All or part of the clot may break off and travel up the artery to the brain where it can interrupt blood flow and cause a stroke.
 - Many common activities of daily living involving ordinary neck movements have been associated with stroke resulting from damage to an artery in the neck, or a clot that already existed in the artery breaking off and travelling up to the brain.

Chiropractic, Physiotherapy, Sports Therapy and Kinesiology treatments have also been associated with stroke. However, that association occurs very infrequently, and may be explained because an artery was already damaged and the patient was progressing toward a stroke when the patient consulted the chiropractor. Present medical and scientific evidence does not establish that Chiropractic, Physiotherapy, Sports Therapy and Kinesiology treatment causes either damage to an artery or stroke.

The consequences of a stroke can be very serious, including significant impairment of vision, speech, balance and brain function, as well as paralysis or death.

- Osteoporosis, minor undiagnosed fractures, bone tumors or bone infections: A patient may not be aware of
 previous bone pathology which may present a risk to spinal manipulation. A manipulation in such patients may
 cause a bone fracture. In such cases, it is the Doctors responsibility to refer patient for diagnostic imaging, tests and
 further management.
- **Dry needling:** I have been informed that dry needling is a safe method of treatment, but that it may have side effects including bruising, bleeding, numbness, tingling or pain near the needling sites that may last a few days and dizziness, nausea or fainting. Unusual risks of dry needling include severe emotional reaction, seizure, pneumothorax, organ puncture systemic infection or broken needle.

Alternatives

Alternatives to Sports Medicine Specialist, Chiropractor, Physiotherapist, Sports Therapists and Kinesiologists treatments may include consulting other health professionals. Your Doctor/therapist may also prescribe rest without treatment, or exercise with or without treatment.

Injection and Medication

All injection and medication will be prescribed by a Doctor. This will complement other treatments you may receive. The Doctor will advise you on the benefits and possible side effects.

Questions of concerns

You are encouraged to ask questions at any time regarding your assessment and treatment. Bring any concerns you have to your Doctor or Therapist's attention. If you are not comfortable, you may stop treatment at any time. You have the right to have your concerns heard and resolved when possible.

Complaints

If you are not happy with how your concern is resolved, you may file a complaint with the Center for Healthcare Planning & Quality (CPQ), Dubai Healthcare City, P.O. Box 505001, Dubai, UAE by calling +971 4 324 555, or by sending an email to cpqclientfeedback@cpq.dhcc.ae. A complaint form is available at our front reception.

Please be involved in and responsible for your care. Inform your therapists immediately of any change in your condition.

I hereby acknowledge I understand the nature of the treatment to be provided to me. I have considered the benefits and risks of treatment, as well as the alternatives to treatment. I hereby consent to Family and Sports Medicine, Chiropractic, Physiotherapy, Sports Therapy and Kinesiology treatment as proposed to me. I grant Diversified and Integrated Sports Clinic permission to contact me directly via telephone, text message or email to discuss any matter that may arise in the future.

Date:	
Patient's name (please print)	Therapist's name