



Richview Physiotherapy & Rehabilitation Centre Inc

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Confidential Patient Health History

Aleksandra Bombska R TCMP/RAc #2955

Tel: [4163580391](tel:4163580391) email: bombska@rogers.com

Date:.....

Welcome to Aleksandra Bombska acupuncture. Please take a few moments to fill out this questionnaire carefully. All answers will be held strictly confidential. If you have any questions, please ask us. Thank you for your patronage.

First name:..... Last name:.....

Address:.....

City:.....Postal code:.....

Home phone:.....

Sex:.....Years in Canada:.....

D.O.B.:.....

Email:.....

Occupation:..... Place of birth:.....

Family physician:..... Phone #:.....

How did you find us: newspaper ad, street sign, flyer, phone directory, media, other

Referred by:.....

What is your major health concern?.....

Medical history:

Hospitalization	High/low blood pressure	Hepatitis
Pregnancy	Lung disease	Aids
Allergy disease	Liver disease	Venereal
Dermatitis	Kidney disease	Migraines
Bleeding disorders	Diabetes	Epilepsy
Heart disease	Cancer	

Please write down details for any items checked above or other significant illnesses/trauma:

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.....
Please list all
medications:.....

.....
Family medical history: Allergies, diabetes, asthma, cancer, heart disease, high blood pressure,
seizures, stroke,
other:.....
.....

Chief
complaint:.....
.....
.....
.....
.....

Onset of present
condition:.....
.....

Diagnosis by
physician:.....
.....

Location of pain and discomfort, time of greatest discomfort, additional
info:.....
.....
.....
.....

Pain: Dull, lingering, sharp, stabbing, migrates, burning, distanding, contracting, aggravated/
alleviated
Head and body: Headaches, migraines, body aches, joint pain, neck pain, back pain, muscle pain,
weak limbs, numbness, heaviness, stiffness
Cold and heat: hands feet
Sweating: spontaneous, night sweats, hot flashes, local sweats
Energy: 1-10
Fatigue, easily, sudden energy drop, dizziness, drowsy, dyspnea/sob, fainting
Sleep hours:.....
Restful, insomnia, heavy sleep, dream-disurbed, not restful, grinds teeth
Urine: normal, polyuria, urgency, nocturia, onfrequent, dysuria, hematuria, clear, dark, excess,
scanty
Bowl movement: regular, diahrea, constipation, loose/watery, gas, hard, dry, burning explosive
Appetite:.....
Craving, vomiting, abd cramps/pain, nausea, gas, bloating, heartburn, bad breath, food
preferences

Emotions: calm/relaxed, depressive, anxious, angry, irritable, stressed, grief, overthinking, fearful

Life style: smoking, overweigh, thin, heavy, shift work, exercise, caffeine, alcohol

Eyes: Blurry vision, spots in front of the eyes, poor vison, dry eyes, burning , red, yellow

Skin and hair: Rashes, iching, dry skin, ulcarations, hives, dandruff, hair loss, other

Gynecology: regular, irregular, amenorrhea, clots, heavy, light, pale, dark, discharge, PMS, pain

Other.....

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Tongue:.....Pulse.....

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