

Cotswolds Health medical form

Please fill out to the best of your ability, do not worry if you are unsure.



Name DOB

Address

Phone number(s) Email address

Occupation

GP General Health

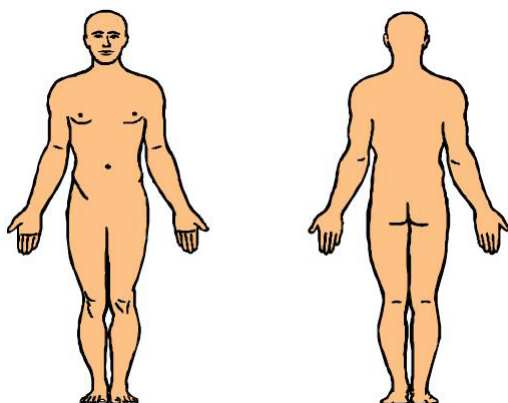
Medication

Main problem(s)

Weekly activity level

Please outline any relevant operations or injuries

History of present condition (Please use diagram to pin location)



What makes it better?

What makes it worse?

Does the condition affect your sleep?

Describe how the condition changes throughout the day

Are you currently seeing a doctor for this or any other condition?

Please indicate if you have the following

	Yes	No
Active implants (e.g. pacemaker)		
Inflammation		
Have you ever taken Anabolic steroids?		
Do you suffer from anaemia?		
Do you have a bacterial infection?		
Bone condition (e.g. osteoporosis, spondylitis spondylolysis)?		
Do you suffer from any cardiovascular disease (e.g. Angina)?		
Circulator insufficiency (e.g. varicose veins arteriosclerosis, DVT)?		
Do you suffer from a degenerative disc disease?		
Do you suffer from diabetes?		
Do you suffer from excema?		
Do you suffer from epilepsy?		
Do you have a fracture (local)?		
Do you suffer from gout?		
Do you suffer from haemophilia?		
Have you ever had a heart attack?		
Do you have hypertension (controlled)?		
Do you have hypotension (not controlled)?		
Do you have internal joint derangement?		
Do you have joint hypermobility?		
Have you ever had malignancy (cancer)?		
Do you have any metal implants?		
Do you suffer from osteoarthritis?		
Do you suffer from periostitis?		
Are you pregnant?		
Do you have a renal disorder?		
Do you suffer from rheumatoid arthritis?		
Do you have any sensory loss?		
Have you been prescribed Warfarin/Heparin?		

Further details

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I confirm that, to my best knowledge the above details are correct. I also give consent for James Aylward to carry out appropriate treatment(s).

All data is stored in accordance with with the Data Protection Act and will not be passed on.

Signed Countersign (if under 18)

Date

(If the patient is under 18 years old, a chaperone must accompany the patient at all times.)