

BRUYERE FOOT SPECIALISTS

First name: _____ Last Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home phone: _____ Work Phone: _____

Cell phone: _____ Email: _____

Which is your preferred method of contact: _____

_____ Male _____ Female Date of birth: _____ year _____ month _____ day

Veterans K card #: _____

How did you find out about Bruyere Foot Specialists?

Help us help you! Please answer the following foot questions

What is the reason for your visit today? (check all that apply)

_____ Nail care _____ Plantar warts _____ Calluses/corns
_____ Back pain _____ Knee pain _____ Bunions
_____ Hammer toes _____ Flat feet _____ Heel pain

Other:

Is your condition painful? _____ yes _____ no Since how long: _____

Height: _____ Weight: _____ Shoe size: _____

On average how much time are you on your feet?

_____ 20% _____ 40% _____ 60% _____ 80% _____ 100%

Do you smoke: _____ yes _____ no

What type of footwear do you wear most?

Safety shoe/boots Athletic Dress Sandals

Do you have or have you ever had the following: (check all that apply)

Diabetes: Type 1 Type 2 How long? _____
 Heart trouble Skin disorders Vision problems
 High Blood Pressure Stroke Arthritis
 Fibromyalgia Cramps/numbness/tingling

Please list your current medications:

Allergies:

I hereby allow and consent to an examination and treatment by the
Chiroprapist and/or anyone working in this clinic authorized by the Chiroprapist.

I consent/allow the Chiroprapist to send my physician a report regarding my
foot exam and treatment plan.

Signature: _____ Date: _____

Family Dr's name: _____

Address: _____

Phone #: _____

Emergency contact: _____ Phone: _____

Bruyere Foot Specialists promises to treat your personal information with respect. Our Privacy policy complies with privacy legislation, the standards of the College of Chiroprapists of Ontario and the law. Be assured that everyone in our office is committed to ensuring that you receive the best quality foot care.

Chiroprapist's signature: _____