

**Reese Family Chiropractic
Review of Systems**

Chiropractic care focuses on the integrity of your nervous system, which controls and regulates our entire body. Please darken the circle beside any condition that you've HAD or currently HAVE. Mark NONE if there is no condition that applies to you. And please initial at the bottom of each column.

Name _____

Date _____

A. Constitutional

Had / Have

- Fainting
- Sudden weight Gain/loss (circle one)
- Low libido
- Fatigue
- Poor appetite
- Weakness
- None

Initials _____

B. Integumentary

Had / Have

- Skin cancer
- Acne
- Eczema
- Psoriasis
- Hair loss
- Rash
- Skin problems
- Breast problems
- None

Initials _____

C. Sensory

Had / Have

- Head problems
- Ear problems
- Eye problems
- Nose problems
- Throat problems
- Blurred vision
- Chronic ear Infection
- Hearing loss
- Ringing in ears
- Loss of smell
- Loss of Taste
- Hearing Aids
- Glasses/Contacts
- None

Initials _____

D. Cardiovascular

Had / Have

- High blood pressure
- Poor circulation
- Bruising
- Low blood pressure
- Angina
- High cholesterol
- None

Initials _____

E. Respiratory

Had / Have

- Asthma
- Hay fever
- Emphysema
- Apnea
- Shortness of breath
- Pneumonia
- None

Initials _____

F. Digestive

Had / Have

- Anorexia/bulimia
- Heartburn
- Food sensitivities
- Ulcer
- Constipation
- Diarrhea
- Gastrointestinal
- None

Initials _____

G. Genitourinary

Had / Have

- Kidney stones
- Prostate issues
- Infertility
- Erectile Dysfunction
- Bedwetting
- PMS symptoms
- None

Initials _____

H. Musculoskeletal

Had / Have

- Osteoporosis
- Neck pain
- Arthritis
- Elbow/wrist pain
- Knee injuries
- Back problems
- Foot/ankle pain
- TMJ issues
- Scoliosis
- Hip disorders
- Shoulder pain
- Poor posture
- None

Initials _____

I. Neurological

Had / Have

- Anxiety
- Dizziness
- Headache
- Pins & needles
- Depression
- Numbness
- None

Initials _____

J. Endocrine

Had / Have

- Thyroid issues
- Frequent infection
- Immune disorders
- Swollen glands
- Hypoglycemia
- Low energy
- Diabetes
- None

Initials _____

Patient Signature

Dr. Douglas Reese