

	Personal Details						
Name							
Date of Birth							
Address							
Phone number							
Email address							
Doctor Name							
Doctor Address							
Sporting Activity							

How did you hear about us? (Please tick)							
Website	Facebook						
Occupational Health	Instagram						
Friend/Family	Email						
Kent Sport Staff	University staff						
Canterbury Hockey Club	Fitness Suite						
Other:	Event: 10km/VC Cup /Pilgrims cycle						

weight loss in feet History of cancer Unsteady with walking Fibromyalgia Diabetes Bladder/Bowel problems Hernia Epilepsy Saddle Anaesthesia Hepatitis Asthma Inability to lie flat Tuberculosis Heart Facial/Tongue pins and Are you curre problems/Stroke needles/numbness pregnant? Raised blood Nausea Kidney diseas Pressure Anxiety/Depression Shortness of breath Use of orthotic Any other conditions/comments from YES with dates and descriptions Orthopaedic Conditions YES NO YES NO Arthritis Limited joint range Joint replacement Broken bones Scoliosis Slipped discs				Medica			. / 1			
Unexplained weight loss in feet History of cancer Unsteady with walking Fibromyalgia Diabetes Bladder/Bowel problems Hernia Epilepsy Saddle Anaesthesia Hepatitis Asthma Inability to lie flat Tuberculosis Heart Facial/Tongue pins and Are you curre problems/Stroke needles/numbness pregnant? Raised blood Nausea Kidney diseas Pressure Anxiety/Depression Shortness of breath Use of orthoti Any other conditions/comments from YES with dates and descriptions Orthopaedic Conditions YES NO YES NO Arthritis Limited joint range Joint replacement Broken bones Scoliosis Slipped discs Sprains/Strains Congenital hip dislocations Any other conditions/comments from YES with dates and descriptions Any other conditions/comments from YES with dates and descriptions	Ple			t any of the following	which	-		ve had in the past:	VEC	NO
weight loss in feet	II II I	YES	NO	D'I a col D' con a d'Ale	11	YES	NO	F. C.	YES	NO
History of cancer Unsteady with walking Fibromyalgia Diabetes Bladder/Bowel problems Hernia Epilepsy Saddle Anaesthesia Hepatitis Asthma Inability to lie flat Tuberculosis Heart Facial/Tongue pins and Are you curre problems/Stroke Nausea Kidney diseas pressure Anxiety/Depression Shortness of breath Use of orthoti Any other conditions/comments from YES with dates and descriptions Orthopaedic Conditions YES NO YES NO Arthritis Limited joint range Joint replacement Broken bones Scoliosis Slipped discs Sprains/Strains Congenital hip dislocations Any other conditions/comments from YES with dates and descriptions Any other conditions/comments from YES with dates and descriptions		i			edles			Fatigue		
Diabetes Bladder/Bowel problems Hernia Epilepsy Saddle Anaesthesia Hepatitis Asthma Inability to lie flat Tuberculosis Heart Facial/Tongue pins and needles/numbness pregnant? Raised blood Nausea Kidney diseas Pressure Anxiety/Depression Shortness of breath Use of orthotic Any other conditions/comments from YES with dates and descriptions Orthopaedic Conditions YES NO YES NO Arthritis Limited joint range Joint replacement Broken bones Scoliosis Slipped discs Sprains/Strains Congenital hip dislocations Any other conditions/comments from YES with dates and descriptions			<u> </u>					en L.		
Epilepsy Saddle Anaesthesia Hepatitis Asthma Inability to lie flat Tuberculosis Heart Facial/Tongue pins and Are you curre problems/Stroke needles/numbness pregnant? Raised blood Nausea Kidney diseas pressure Shortness of breath Use of orthotic Any other conditions/comments from YES with dates and descriptions Orthopaedic Conditions YES NO YES NO Arthritis Limited joint range Joint replacement Broken bones Scoliosis Slipped discs Sprains/Strains Congenital hip dislocations Any other conditions/comments from YES with dates and descriptions	•			•				, ,		
Asthma Inability to lie flat Tuberculosis Heart Facial/Tongue pins and needles/numbness pregnant? Raised blood Nausea Kidney diseas pressure Anxiety/Depression Shortness of breath Use of orthotic Any other conditions/comments from YES with dates and descriptions Orthopaedic Conditions YES NO YES NO Arthritis Limited joint range Joint replacement Broken bones Scoliosis Slipped discs Sprains/Strains Congenital hip dislocations Any other conditions/comments from YES with dates and descriptions			<u> </u>		lems					
Heart problems/Stroke needles/numbness pregnant? Raised blood pressure Anxiety/Depression Shortness of breath Use of orthotic Any other conditions/comments from YES with dates and descriptions Orthopaedic Conditions YES NO YES NO Arthritis Limited joint range Joint replacement Broken bones Scoliosis Slipped discs Sprains/Strains Congenital hip dislocations Any other conditions/comments from YES with dates and descriptions								'		
Problems/Stroke needles/numbness pregnant? Raised blood pressure Shortness of breath Use of orthotic Any other conditions/comments from YES with dates and descriptions VES NO YES NO	Asthma			•						
Raised blood pressure Anxiety/Depression Any other conditions/comments from YES with dates and descriptions Orthopaedic Conditions YES NO YES NO Arthritis Limited joint range Joint replacement Broken bones Scoliosis Slipped discs Sprains/Strains Congenital hip dislocations Any other conditions/comments from YES with dates and descriptions		ì						Are you currently		
Anxiety/Depression Shortness of breath Use of orthotic Any other conditions/comments from YES with dates and descriptions Orthopaedic Conditions	•		<u> </u>	needles/numbness				i e		
Anxiety/Depression Shortness of breath Use of orthotic Any other conditions/comments from YES with dates and descriptions Orthopaedic Conditions	Raised blood	ì		Nausea				Kidney disease		
Any other conditions/comments from YES with dates and descriptions YES NO YES NO	pressure									
Orthopaedic Conditions YES NO YES NO Arthritis Limited joint range Joint replacement Broken bones Scoliosis Slipped discs Sprains/Strains Congenital hip dislocations Dislocated/subluxed judislocations Any other conditions/comments from YES with dates and descriptions	Anxiety/Depression	1		Shortness of breath				Use of orthotics		
Broken bones Scoliosis Slipped discs Sprains/Strains Congenital hip dislocations Any other conditions/comments from YES with dates and descriptions		YES	NO						YES	NO
Broken bones Scoliosis Slipped discs Sprains/Strains Congenital hip dislocations Any other conditions/comments from YES with dates and descriptions	Arthritis	112	INO	Limited joint range	ILJ		loint re	enlacement	ILS	110
Sprains/Strains Congenital hip dislocated/subluxed judislocations Any other conditions/comments from YES with dates and descriptions		·					-			
dislocations Any other conditions/comments from YES with dates and descriptions				• • • • • • • • • • • • • • • • • • • •						
	., ., ., .	ì					Bisiocatea, sabiaxea joints			
Have you had any investigations/treatments/medication linked to your current injury		Any o	ther c	onditions/comments f	rom YE	S with o	dates a	nd descriptions	•	
Have you had any investigations/treatments/medication linked to your current injury										
Have you had any investigations/treatments/medication linked to your current injury										
Have you had any investigations/treatments/medication linked to your current injury		!	ation t		isstics	ادمادما	to vou	w accompany to the company of the	MDI V D	
	Have you had an	v iiive	Sugar	ions/treatments/meu	ication	iiiikeu	to you	r current injury: E.g. i	IVIKI, A-K	ау
	Have you had an	7 11170								
	Have you had an	,								
Have you had any investigations (treatments (madiention linked to your manious in	Have you had an	, 1114C								
Have you had any investigations/treatments/medication linked to your previous in	·		avostis	rations/two-two-ut-/	odica:	on lini	od +=	vous provious inium 2	E a BADI	

Body Chart

