

Rolf Method Reno

rolfmethodreno.com

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CLIENT INFORMATION FORM (Please Print)

Today's Date _____

Client:

Circle One: Married Single Separated Divorced Widowed

Name: _____

Address _____

City _____ State _____ Zip _____

Phone-home _____ Phone-work _____

Phone- cell _____ Fax _____

Email _____

Occupation _____

Employer/School, if student _____

Spouse/ Parent, if minor:

Name _____

Phone-home _____ Phone-work _____

Who may we thank for your visit _____

I understand that any cancellations or changes in appointments must be arranged 24 hours or more in advance, otherwise a full session fee will be charged.

Personal Medical History

Birthdate: ____/____/____ Age ____

Height _____ Weight _____

Have you ever been hospitalized (please include illness, length of stay, and what year)

Broken Bones, strains, sprains, etc? (include year of occurrence):

Current medications:

(include name of medication, purpose of medication, and length of time):

Please List *All* Surgeries that you have received, and when the procedure was completed

Do You Have Chronic or periodic (comes and goes) pain? If so, please describe where and list the severity of pain on a 1-10 scale.

Allergies?

Extended illnesses?

Chiropractic care? With whom? How long?

Women, do you use an IUD? Yes No

Is there anything else you would like me to know about your medical history?

Please mark any category that may be significant related to our work together.

Sexual abuse: _____

Psychological or emotional abuse: _____

Any other traumatic or significant event: _____

What do you do for exercise? How often?

Have you done or are you currently doing any psychotherapy or physiotherapy? With whom and for how long?

What are your desires, expectations, goals, hopes, and intentions for the Structural Integration process?

If treatment is related to auto trauma, please provide all necessary claim details, and full details of physical conditions resulting from the accident. Please acknowledge that you are responsible for payment regardless of insurance.

Signed _____

Guidelines

- Do not eat a heavy meal before a session, nor fast during the Structural Integration process
- Be sure to be well hydrated for the session. This means drinking plenty of water in the days leading up to an appointment.
- Plan on taking it easy at least 24 hours after a session. Usual exercise routines may not be ideal immediately after a session. Walking can be beneficial to integrate the work.
- Appropriate attire is underwear for men, bra and underwear for women. Men: No boxer-shorts. Brief style underwear is best. Women: No Yoga Leggings. Please no sports-type bras, as they limit access to the ribcage.
- Make sure not to have lotion on your skin for the session. Lotions can make it more difficult to work with your fascia.
- Please set aside 1.5 hours for your appointment.
- I do not accept credit/debit cards. Please be prepared to pay by cash or check.