

Dynamic Exam Form

Name: _____ Date: _____

Our goal is to offer the very highest quality chiropractic care to you and your family. Would you help us by responding to these questions about your progress?

Changes often happen quickly during your care as your body begins the natural healing process. Many patients neglect to tell us about them. Here's a way you can help us help you:

CARE

What changes have you noticed since beginning care?

Positive changes:

Negative changes:

On a scale of one to ten, rate the level of improvement of your spine so far.

No change

Major change

1 2 3 4 5 6 7 8 9 10

On a scale of one to ten, rate the impact of this improvement on your life.

No change

Major change

1 2 3 4 5 6 7 8 9 10

Would you say your improvement is:

Progressing at the speed you expected

Taking longer than you expected

Occurring much faster than you expected

Do you think you could adequately describe the advantages of participating in a Wellness Adjustment Plan? Yes _____ No _____

Do you understand why chiropractic care is important for children? Yes _____ No _____

STAFF

How would you rate the concern shown by our staff?

Uninterested

Deeply Concerned

1 2 3 4 5 6 7 8 9 10

How would you rate the training, qualifications and competency of our staff?

Unorganized										Efficient and knowledgeable
Unprepared										
1	2	3	4	5	6	7	8	9	10	

Is there anyone who has been especially helpful?

What ways would you change the staff, office, or procedures we use to improve the quality of care?

What do you like most about our office?

We strive to fully inform our patients about their care and explain how chiropractic relates to their health. How would you describe our educational efforts?

- Excellent, I've learned a lot
- Helpful and interesting
- Still leaves some questions unanswered
- Could be significantly improved
- Waste of patient's and staff's time

SUPPORT

What kind of comments have you heard from your friends or family when you've told them about seeing a chiropractor?

How do people react or respond to you when you talk to them about chiropractic?

As with all private professionals, our practice is built upon referrals. We expect you to tell others who are not healthy or want to maximize their health about Chiropractic. Please list their names, and we will discuss with you how best to inform them about their health care choices.

Name: _____ Address: _____

Name: _____ Address: _____

Name: _____ Address: _____

Please mention any other general comments about our office:

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