

Confidential Client Case History and Intake Form

Ramses Rodriguez | Certified Master Usui Ryoho Reiki Practitioner

Name:	Date:
Address:	Phone:
Postal Code:	Email:
Date of Birth:	Referred by:
Would you like to receive updates via email?	

Primary Concerns:	<i>Rank symptoms from 1 to 10 whereby 1 means "I hardly notice symptoms" and 10 means "my symptoms are unbearable."</i>

Medications/Remedies/Supplements & Reason for taking:

Significant Accidents/Injuries:

Please place an X beside any conditions that apply (past or present):

- | | | |
|---------------|--------------------|--------------------|
| Cancer | Varicose Veins | Allergies: |
| Heart Disease | H/L Blood Pressure | Surgery: |
| Diabetes | Paralysis | Genetic Disorders: |
| Stroke | TMJ Dysfunction | Phobias: |
| Epilepsy | Arthritis | |

Place an X beside any symptoms that you experience:

- | | | |
|---------------------|------------------------|--------------------------|
| Headache | Heavy feeling in limbs | Cold in hands and feet |
| Faintness/Dizziness | Blurriness of vision | Lower Back pain |
| Tightness in Jaw | Constipation | Shoulder/neck pain |
| Weak body parts | Loose Bowel Movements | Carpel tunnel syndrome |
| Smoking (#/day__) | Irritated Bowel | Menstrual Irregularities |
| Nervousness | Pains in heart/chest | Other: |
| Poor Appetite | Indigestion | |
| Excessive Urination | Insomnia | Are you pregnant? |
| Grinding of Teeth | Fatigue | |

Place an X beside any areas below that you would like improvement in:

- | | | |
|--|---|--------------------------------------|
| Negative self-talk, self-sabotage | Ability to reach ideal weight | Increase learning ability |
| Belief in ability to achieve goals | Personal magnetism | Beneficial, relationships |
| Ability to relax | Strengthen memory/concentration | Prosperity (attract what you choose) |
| Ability to use dreams as mental tool for problem solving | Breaking old habits | Attitude and skills at work |
| Eliminate procrastination | Release negative events | Self-Esteem |
| Ability to take action | Ability to align body/mind for self-healing | Youthful Vitality |

Below, please describe what you would like to accomplish with these treatments?