	Please answer all questions	
	Date DOB	
Na dianti	one/OTC (Include the condition the systematic	
iviedicati	ons/OTC (Include the condition they treat):	
Decline to	provide	
ocomic to	provide	
Drug Alle	rgies:	
	Current everyday, Current occasional,	
Smoking:		
Smoking: Former si	Current everyday, Current occasional,	
Smoking: Former si Alcohol u	Current everyday, Current occasional, moker, never smoked use	
Smoking: Former si Alcohol u	Current everyday, Current occasional, moker, never smoked	
Smoking: Former si Alcohol u Allergies	Current everyday, Current occasional, moker, never smoked se	
Smoking: Former si Alcohol u Allergies Race: _	Current everyday, Current occasional, moker, never smoked use	
Smoking: Former si Alcohol u Allergies Race:	Current everyday, Current occasional, moker, never smoked ise American Indian or Alaska NativeAsianBlack or African AmericanNative Hawaiian or other Pacific group	
Smoking: Former si Alcohol u Allergies Race: _ —	Current everyday, Current occasional, moker, never smoked se American Indian or Alaska Native AsianBlack or African American Native Hawaiian or other Pacific group White	
Smoking: Former si Alcohol u Allergies Race: _ —	Current everyday, Current occasional, moker, never smoked ise American Indian or Alaska NativeAsianBlack or African AmericanNative Hawaiian or other Pacific group	
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Smoking: Former si Alcohol u Allergies Race: Ethnicity	Current everyday, Current occasional, moker, never smoked se American Indian or Alaska Native AsianBlack or African American Native Hawaiian or other Pacific group White	

Chiropractic Physicians, PC, 705 Ewald Ave. SE, Salem, OR 97302