

Patient Weight Loss Form

Welcome to the Chiropractic office of Dr. Bickerton. If you are here for the purpose of losing weight we can help you. We utilize a proven all-natural program called NuLean that has helped thousands of people lose weight safely, while also improving their health.

Since Nulean is not only a weight-loss program but a cleanse, you should understand that the theory behind the program may be different than any program you may have tried in the past. Because of this fact, we strongly suggest that you listen and watch the recommended videos and audio CD, and read the instructions carefully. These actions are vital, so that you receive the most benefit from the program. Our goal is to improve your overall health as well as enable you to shed pounds and inches and keep them off. Please help us help to you by filling out the information below.

Today's date: _____

Name: _____

Address: _____

Phone: _____ E-mail: _____

How did you find out about us? _____

How much weight would you like to lose? _____

Would you be willing to make some lifestyle changes to achieve this weight loss goal?

Yes _____

No _____ (Please explain) _____

What diets or systems have you tried in the past? _____

What was the result? _____

Do you have any of the following illnesses or symptoms? Answer "yes" or "no."

Diabetes _____ Allergies _____

Digestive problems. _____ Low blood sugar _____

High bld. pressure _____ Low blood pressure _____

Low energy _____ Skin eruptions _____

Often crave junk food/sweets? _____

Irregular menstrual cycle _____

Continued. . .

Do you exercise? If so please state what you do

How often? _____

What do you dislike the most about being overweight?

What health difficulties are you experiencing that you feel may be a result of being overweight?

What is your age? _____

Please give an example of a typical day's meals/snacks

Are you currently taking any medication, if so please list each here:

Please write down three reasons you would like to lose weight. These shouldn't be generalizations, but rather personal reasons that actually mean something to you. It is important to list these out as both a guide for us to help you, and motivation for yourself so that you may reach your ideal weight.

Do you have any friends or relatives that you think might like to lose weight? Yes _____ No _____

THANK YOU