

PATIENT PROFILE

NAME: _____ **DATE:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____ **COUNTY:** _____

HOME #: _____ **WORK #:** _____

CELL# : _____ **FAX #:** _____

EMAIL: _____

Would you like to receive our weekly eNewsletter? Yes / No

Who can we thank for referring you? _____

AGE: _____ **HEIGHT:** _____ **WEIGHT:** _____ **DOB:** _____

Please list, in order of importance, your reasons for seeing Dr. Anderson:

1. _____ 3. _____

2. _____ 4. _____

Please list any medically diagnosed diseases: _____

Please list any surgeries you have had, along with the dates:

Please list any pharmaceutical medications that you are currently taking:

Please list any nutritional supplements that you are currently taking:

Date of last physical/check up: _____ **Marital Status:** _____

Occupation: _____ **Retired?:** _____

Where were you raised? _____

Vaccinated? YES: _____ **NO:** _____ **SOME:** _____

Describe any diseases that are prominent in your family:

•LIFESTYLE PROFILE

Are/Were you a smoker? _____ How long? _____ How much? _____ Quit? _____

Did/Do you drink coffee? _____ How long? _____ How much? _____ Quit? _____

Did/Do you drink carbonated beverages? _____ How much? _____ Quit? _____

Do you eat large amounts of chocolate? _____

Do you eat seafood? What type and how frequently? _____

Do you exercise? _____ How Often? _____ What type? _____

Do you use a micro-wave oven? _____ Electric Blanket? _____ Water Bed? _____

Do you have amalgam dental fillings? _____ How many? _____

Have you had any fillings removed? _____ When? _____

Do you have any root canals? _____ How many? _____ Crowns? _____ Other? _____

Do you use aluminum cookware? _____

Do you use antacids? _____ What type of deodorant do you use? _____

Do you have pets? _____ What type? _____

What drugs have you taken? (Including prescription, over the counter, or recreational)

Are there any high-tension power lines or transformers near your home or where you work? _____

Do you have any sleep difficulties? Please describe: _____

Do you have digestive issues? _____ Indigestion _____ Bloating _____ Gas _____ Acid Reflux _____ Diarrhea _____

How often do you have a bowel movement? _____

PLEASE GIVE A DIET SUMMARY FOR THE LAST FIVE DAYS:

DAY 1: _____

DAY 2: _____

DAY 3: _____

DAY 4: _____

DAY 5: _____

WOMEN ONLY:

Date of last menstruation: _____

Are you now on or have you ever taken birth control? _____ How long? _____

If menopausal; date of last GYN visit: _____

Are you pregnant or nursing? _____ Do you have children? _____ How many? _____

Check those that apply: PMS _____ Heavy Periods _____ Irregular Periods _____ Cysts/Fibroids _____

Have you had any cosmetic surgery? _____

STATEMENT OF UNDERSTANDING

Seneca Anderson, L.Ac & Alice Honican, L.Ac. and Andrea Lewinter, L.Ac. are nationally certified and Georgia state licensed Acupuncturists. Acupuncture is a form of therapy developed from traditional and modern oriental concepts for health care that employs oriental medical techniques, treatment, and adjunct therapies for the promotion, maintenance, and restoration of health and the prevention of disease.

Cristina McMullen holds a Bachelor of Science in Complimentary & Alternative Medicine. She is also a Certified Wellness Coach and Certified Holistic Health Practitioner.

Neither **Seneca Anderson, L.Ac., Alice Honican, L.Ac., Andrea Lewinter, L.Ac. nor Cristina McMullen** represent themselves as medical doctors. The Longevity Health Center encourages you to see your physician if you are interested in medical diagnosis and treatment.

Acupuncture point evaluation will reveal "**disturbance signals**" for bacteria, viruses, environmental pollutants, etc. The modalities employed by **Seneca Anderson, L.Ac., Alice Honican, L.Ac. and Cristina McMullen, HHP** are not approved for any sort of medical evaluation. Keep in mind that oriental medicine is a completely different paradigm than modern scientific medicine. Rather these are techniques of modern acupuncture and are utilized to enhance energy flow, in accordance with the principles of oriental medicine. Our experience is that often times these "disturbance signals" can not be corroborated by standard laboratory testing. Our clients usually want to know what sorts of disturbances their acupuncture point evaluation reveals, and we at Longevity Health Center believe our clients have the right to know the results of their testing. This evaluation should in no way be construed as a medical diagnosis. We are not qualified to make any such diagnosis. This is simply information we utilize in guiding our acupuncture treatment.

I understand that none of the practitioners or the associates or staff of Longevity Health Center are medical doctors. I choose to undergo an evaluation and treatment in accordance with oriental medicinal principles, utilizing techniques of traditional and modern acupuncture.

I have read and understand this *STATEMENT OF UNDERSTANDING*.

SIGNATURE OF PATIENT

DATE

SIGNATURE OF PARENT FOR MINOR

DATE

1745 Woodstock Road ☼ Roswell, GA 30075
770-642-4646 ☼ www.longevityhealthcenter.com

Bio-Terrain Assessment (BTA) Urinalysis

PREPARATION INSTRUCTIONS

The urine contains a wealth of bio-chemical information. It is your metabolic diary. All bio-chemical processes of your body leave residues that eventually find their way to the urine. Thus the urine specimen is ideal for measuring and monitoring your metabolic health.

In order for the lab to obtain the clearest information from your urine specimen, please do your best to follow the instructions for 2 days prior to the collection of your morning urine on the day of your appointment.

LIMIT OR AVOID THE FOLLOWING:

- ^ Nutritional supplements & non-essential pharmaceutical medications
- ^ Your known allergenic foods.
- ^ Artificial food colorings.
- ^ Artificial sweeteners, sweets of all kinds or sugar.
- ^ Alcohol, coffee, black tea, sodas and sports drinks.
- ^ Laxatives & bulking agents, unless prescription.
- ^ Excess salt. (MSG)
- ^ Processed, adulterated or JUNK foods.

EAT WELL BALANCED MEALS, INCLUDING PROTEIN

Try to drink a minimum of 6 glasses of water daily.

Collecting & Transporting Urine Specimen.



Use the specimen cup provided by our office, or a clean glass or plastic container.

Catch the first morning void (after 4:00 am.) the day of your appointment.

Wait till mid-stream to catch the sample.

LEAVE THE TABLET IN THE CONTAINER PROVIDED

Put container in a baggie for leakage protection.

Do not refrigerate specimen. Keep at room temperature.

If you have further questions, please contact us at: 770-642-4646

Thermography (CRT)

PREPARATION INSTRUCTIONS

❖ Discontinue all non-essential medication 24 hrs prior to your test.

Take prescriptions as needed

⤴ Discontinue all VITAMIN SUPPLEMENTS

❖ Do not have any energetic therapies such as acupuncture a few days prior to the exam.

On the day of your exam:

➤ Do not smoke.

➤ Do not have any caffeine; coffee, tea, soda, chocolate.

➤ Do not take a hot or cold shower. You may wash your face.

➤ Do not use lotion or make-up on your face or body.

➤ Do not exercise the morning of the test.

➤ Eat a light, room temperature breakfast.

➤ Wear a long sleeve button/zip up shirt (no turtlenecks).
and loose long comfortable pants. Wear socks. Wear underwear.

➤ **Women should not wear a bra.**

➤ You may apply deodorant & brush your teeth.

If you are running a fever, please call to reschedule your CRT

A professional technician will perform the CRT. You will be asked to sit in a cool room, about 68 degrees. The first measurements of the head, neck, chest and lower abdomen will be taken. This is performed by a gentle touch of the probe to the skin. You will then be asked to remove your clothes, except for your underwear, thereby subjecting your body to the controlled “stress“ of the cooler air. You will stand exposed to the air for ten minutes. After this time the measurements are repeated and the test is concluded.

If you have further questions, please contact us at: **770-642-4646**

DIRECTIONS TO LONGEVITY HEALTH CENTER

1745 Woodstock Rd., Roswell, GA 30075

770-642-4646

From GA-400 Going North: Take **exit# 7-B**, (West to Roswell). It will circle you around going West on Holcomb Bridge Rd. Continue for 2 miles. You will cross Alpharetta Hwy. & Crabapple Rd. Continue another 3 miles passing Kohl's, Publix, Home Depot and Target. Continue 1 more mile, through the light at Wildwood Springs Subdivision. **TAKE IMMEDIATE RIGHT** into our office park just past traffic light. *(NOTE: The name of the road will change 3 times during the 6 miles)*

From GA-400 Going South: Take **Exit # 7** - Holcomb Bridge Rd. Go **RIGHT**. Continue for 2 miles, You will cross Alpharetta Hwy. & Crabapple Rd. Continue another 3 miles passing Kohl's, Publix, Home Depot and Target. Continue 1 more mile, through the light at Wildwood Springs Subdivision. **TAKE IMMEDIATE RIGHT** into our office park just past traffic light. *(NOTE: The name of the road will change 3 times during the 6 miles)*

From I-75 Going South: Take **EXIT 267A Canton Rd. Connector**. Merge right onto Canton Rd. Go 1.3 miles and **TURN RIGHT** onto Sandy Plains Rd. Go 8.5 miles and **TURN RIGHT** onto Woodstock Rd. (Hwy 92). Get in Left lane. At 2nd light make a **U-TURN** and then turn **RIGHT** immediately into office park.

From I-85 Going South: Exit at Jimmy Carter Blvd. Turn **RIGHT**. Continue 10 miles. Jimmy Carter will become Holcomb Bridge Rd. Cross over GA-400 and continue for 3 miles. You will cross Alpharetta Hwy. & Crabapple Rd. Continue another 3 miles passing Kohl's, Publix, Home Depot and Target. Continue 1 more mile, through the light at Wildwood Springs Subdivision. **TAKE IMMEDIATE RIGHT** into our office park just past traffic light. *(NOTE: The name of the road will change 4 times during the 17 miles)*

From Hwy. 575 South: Take **EXIT # 7** Woodstock Rd. Go **LEFT** on Hwy. 92 toward Roswell. **GO** 8 miles. Pass Sandy Plains Rd. & Mabry Rd. Stay in left lane and make a **U-TURN** at the next light (Wildwood Springs) Turn **RIGHT** into office park immediately after the U-turn.