INCENTIVES
Organic Spa & Salon

157 DEER PARK AVE
BABYLON VILLAGE, NY 11702
631.893.3490

Dr. Donna Brown
Nutritional Evaluation

Patient's Name_____ Date_____

Age:_____ Gender_____ Email Address:_____

Occupation (provide details of exactly what you do)_____

What is the main reason you made this appointment?_____

Is there anything else that bothers you?_____

What prescription medications (if any) do you take on a regular basis?_____

What non-prescription pills/supplements do you take on a regular basis?_____

Dates and details of any past surgical procedures:_____

Are both of your parents still alive?_____ Please comment on their state of health_____

If one or both of your parents are deceased please describe to the best of your ability the cause of their passing:_____

State of health of your siblings (if applicable):_____

State of health of Grandparents (if alive):_____

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To properly evaluate your general health status it is important for you to answer ALL of the following questions. Please respond "yes" if you experience the symptom noted (one time per month or more) and "no" if you do not.

Symptom	Yes/No	Comments
Heartburn		
Regular belching or gas		
Constipation		
Loose bowel movements		
Bad breath		
Food just lays in your stomach		
Digestive problems when eating greasy or fatty foods		
Nauseous		
Lost your taste for meat		
Poor appetite		
Catch colds easily		
Sore throats often		
Chest colds often		
Chronic cough		
Sigh or yawn often		
Sinus problems		
Stuffy nose even when you do not have a cold		
Ear infections often		
High blood pressure		
Low blood pressure		
Pain or tightness in your chest		
Light headed and dizzy often		
Get short of breath easily		
Sleep on more than one pillow		
Heart beats fast for no reason		
Varicose veins		
Ankles swollen in the morning		
Ankles swell later in the day		
Get dizzy when changing position		
Trouble breathing		
Get up more than one time per night to urinate		
Burning or pain when your urinate		
Trouble starting urine flow		
Ever had kidney stones		
Ever had a bladder or kidney infection		
Joints stiff in the mornings		
Swollen joints		
Muscle cramps		
Muscles feel weak		
Numbness of your hands or feet		

Continued

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Symptom	Yes/No	Comments
Hands and/or feet get cold easily		
Tingling sensations in your hands or feet		
Any part of your body “jerk” for no reason		
Tics or twitches		
General aches and pains for no reason		
Reduced physical stamina		
Spinal pain		
Poor muscle coordination		
Itchy skin		
Cuts and scrapes heal slowly		
Brown spots on your skin		
Bruise for no reason		
Acne		
Eyes hurt or itch		
Discharge from your eyes		
Difficulty adjusting to light		
Eyes are bloodshot or sandy		
Blink often		
See poorly in dim light		
Glasses prescription changes more than once in a year		
Have or had cataracts		
Eyes are sensitive to light		
Often get styes in the eye		
Eyes tire easily		
Difficulty concentrating		
Get depressed easily		
Cry easily		
Difficulty relaxing		
Lose your temper easily		
Suffer from insomnia		
Gain weight easily		
Lose weight easily		
Excessive thirst		
Suffer from morning headaches		
Get headaches later in the day		
Get tense if you do not eat on time		
Get tired before you eat		
Exercise on a regular basis		
Smoke		
Drink alcohol		
Would you call yourself a worrier		
Take laxatives		
Crave sweets		
Get tired after eating sweets		
Find it difficult to work under pressure		

Continued

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Symptom	Yes/No	Comments
Low sex drive		
For women only:		
Regular menstrual cycle		
“normal” menstrual flow		
Pain with cycle		
Pain before or after cycle		
Are you in menopause		
Lumps in breasts		

Have you ever been diagnosed as having any of the following conditions:

Condition	Yes/no	Comments:
Arthritis		
Heart disease		
Diabetes mellitus		
Diabetes insipidus		
Hypoglycemia		
Allergies		
Asthma		
Emphysema		
Cancer		
Birth defect		
Multiple Sclerosis		
Parkinsons disease		
Epilepsy		

Any other problems not listed in any of the above:

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Weekly Food Journal

	Breakfast	Lunch	Dinner	Snacks	Supplements
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					