Dr Jane Hamilton
Psychologist

Jane F. Hamilton, Ph.D.
6300 N Placita de Rojelio * Tucson, Arizona 85718
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ADULT CLIENT INFORMATION

Today's Date _____

Name _____ Date of Birth _____

Address _____

Email address _____Home Phone _____

Work phone _____ Cell Phone _____

Name/Place of Employment _____

Reason for your visit today _____

Have you previously consulted with another provider for this complaint? _____

Name of Primary Care Physician _____Physician's Phone____ _____

How did you hear about us? _____

Name of Spouse/Significant Other_____

Married? _____ How long married? _____ How long together? _____

Name(s) of child(ren)	Birthdate(s) of child(ren)
_____	_____
_____	_____
_____	_____

Emergency contact _____

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Jane F. Hamilton, Ph.D.
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SYMPTOM QUESTIONNAIRE

Have you recently had issues with any of the following? (Circle response)

Nausea or vomiting	Yes	No
Intrusive thoughts	Yes	No
Concussion or other head injury	Yes	No
Recent weight or appetite change	Yes	No
Difficulties breathing	Yes	No
Sexual problems	Yes	No
Changes in vision	Yes	No
Blackouts or memory loss	Yes	No
Dizziness or loss of balance	Yes	No
Headaches	Yes	No
Difficulty with coordination	Yes	No
Do your hands tremble sometimes	Yes	No
Feeling fatigued or ill	Yes	No
Change in sleep pattern	Yes	No
Laughing or crying for no apparent reason	Yes	No
Cravings for sweet/salty foods	Yes	No
Overuse of alcohol or recreational drugs	Yes	No
Nicotine use	Yes	No
Have you been feeling anxious?	Yes	No
Have you been feeling depressed?	Yes	No

Any other symptoms that concern you: _____

_____

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Please list all current non-prescription and prescription medications and dosages: _____

_____

_____

Please list any medical issues: _____

_____

_____

On a scale of 1 to 5 (1 being dissatisfied - 5 being satisfied) please rate the following areas of your life.

	Least Satisfied				Most Satisfied
Emotions and Mental Health	1	2	3	4	5
Family Life	1	2	3	4	5
Finances	1	2	3	4	5
Marriage/Significant Relationship	1	2	3	4	5
Personal Relationships	1	2	3	4	5
Physical Health	1	2	3	4	5
Social Life	1	2	3	4	5
Spiritual Life	1	2	3	4	5

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Please describe the current situation: _____

Feel free to continue on the backside of the paper