



## Prenatal Chiropractic Intake Form

Thank you for allowing us the opportunity to be a part of your pregnancy and health care. This form is to be completed in addition to our regular patient history so we can better serve you throughout your pregnancy.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

### CURRENT PREGNANCY

- Due Date/Week: \_\_\_\_\_
- I am in my \_\_\_ week of pregnancy.
- Pre-pregnancy weight: \_\_\_\_\_
- Current weight: \_\_\_\_\_
- Height: \_\_\_\_\_
- Childbirth preparation:  Bradley  Lamaze  Other
- Childbirth caregiver(s):
  - OB/GYN: \_\_\_\_\_
  - Doula: \_\_\_\_\_
  - Midwife: \_\_\_\_\_
- Caregiver's phone #: \_\_\_\_\_
- Last visit to caregiver: \_\_\_\_\_
- I plan on giving birth at:
  - Hospital: \_\_\_\_\_
  - Home
  - Birth Center: \_\_\_\_\_
- What position do you sleep in?  Side  Back  Stomach
- Any traumas during this pregnancy? Y / N
  - If yes, please describe: \_\_\_\_\_
- Any hospitalizations during this pregnancy? Y / N
  - If yes, please describe \_\_\_\_\_
- Any medications during this pregnancy, including over the counter medication? Y / N
  - If yes, please describe: \_\_\_\_\_
- Any fertility treatment? Y / N
  - If yes, please describe: \_\_\_\_\_
- Any other information you would like us to know about you and your pregnancy?  
\_\_\_\_\_

### PREVIOUS PREGNANCIES/BIRTHS

- # of previous pregnancies: \_\_\_\_\_
- # of previous births: \_\_\_\_\_
- Please explain any difference in numbers: \_\_\_\_\_
- Names & ages of children: \_\_\_\_\_

- Your previous births were at:
  - Hospital: \_\_\_\_\_
  - Home
  - Birth Center: \_\_\_\_\_
- Medications used in prior births:
  - None
  - Pitocin
  - Epidural
- Interventions used in prior births:
  - Breaking of water
  - Vacuum
  - Forceps
  - Episiotomy
- How long was your previous labor?
  - Total: \_\_\_\_\_
  - Time before you pushed: \_\_\_\_\_
  - Time you spent pushing: \_\_\_\_\_
- Do you have chiropractic care during your previous pregnancies? Y / N

**AFTER 32ND WEEK OF PREGNANCY**

- Position of baby:
  - Head down
  - Posterior/Sunny side up
  - Breech
  - Malposition
- Confirmed by:
  - Palpation by \_\_\_\_\_ on \_\_\_\_\_
  - Ultrasound by \_\_\_\_\_ on \_\_\_\_\_
- How long do you believe baby has been in this position? \_\_\_\_\_

**THE WEBSTER TECHNIQUE DEFINED**

International Chiropractic Pediatric Association definition of Webster Technique:

The Webster technique is a specific chiropractic analysis and adjustment that reduces interference to the nervous system, balances out pelvic muscles and ligaments which in turn removes torsion to the uterus, reducing the potential for intra-uterine constraint and allows the baby to get into the best possible position for birth.

Statement to pregnant patients of Lauren Cobb, DC

I understand that Lauren Cobb, DC provides chiropractic adjustments to treat musculoskeletal complaints in patients, including pregnant women.

Signature: \_\_\_\_\_

Signature Date: \_\_\_\_\_

Print Name: \_\_\_\_\_