

*Nurturing you through to health and happiness*

**SARI YOUNG**

BNSc (hons); AdDip Naturopathy;  
AdDip Western Herbal Medicine; AdDip Nutritional Science.  
**NATUROPATH AND REGISTERED NURSE**

## **PATIENT PROFILE**

**Date:** \_\_\_\_\_

Name:	Allergies:
Date of birth:	Age:
Phone number:	Religion:
Email:	Blood type:
Occupation:	Number of children:
Postal Address:	

1. How did you hear about this practice?

Word of mouth      Google      website      Newspaper      Flyer

Other:

2. Please list your top three priorities in life:

- 1.
- 2.
- 3.

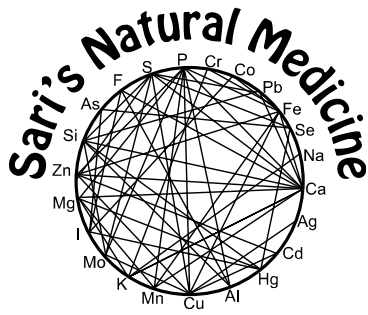
3. List three health goals/ reasons why you came here today in order of priority.  
How long do you think it might take you to achieve these health goals?

Health Goal	Time frame to achieve

4. How motivated and committed are you to improving your health? Please circle a number on the scale. 1= not committed, 10= very committed.

1      2      3      4      5      6      7      8      9      10

5. What has helped motivate and inspire you to make significant life changes in the past and/ or what could help motivate and inspire you to make changes now? Examples might be your family or friends, a 'health scare', or a special event such as wedding or birth of a child. Please comment on how/ why these motivate you.



*Nurturing you through to health and happiness*

**SARI YOUNG**

BNSc (hons); AdDip Naturopathy;  
AdDip Western Herbal Medicine; AdDip Nutritional Science.  
**NATUROPATH AND REGISTERED NURSE**

6. What, if any, limitations do you have in achieving your health goals (eg: time, money, lack of support, energy etc)?

7. List any existing health conditions:

8. List any natural supplements, herbs and remedies you currently taking:

9. List any medications you are currently taking:

10. Which, if any, natural practitioners are you currently seeing?

11. Please rate the following on a scale of 1 (poor) to 5 (excellent). Please comment on the line below, why you have given this rating.

**COMMENTS:**

General health and wellbeing	1	2	3	4	5 -
Overall quality of your diet	1	2	3	4	5
Sense of calm and relaxation	1	2	3	4	5
Quality and quantity of sleep	1	2	3	4	5
Exercise and general activity levels	1	2	3	4	5

12. To improve your health and wellbeing you may be asked to make some changes to your diet and /or lifestyle. If requested to do so, how willing would you be to do the following? Please rate on a scale of 1 (not willing at all), to 5 (extremely willing).

Significantly modify your diet	1	2	3	4	5
Engage in regular exercise/ activity	1	2	3	4	5
Practice relaxation techniques on a regular basis	1	2	3	4	5
Modify your sleep habits	1	2	3	4	5
Have consultations to assess your progress	1	2	3	4	5

Thank you. I look forward to working together with you to help you reach your potential!