

CONTEXT OF YOUR HEALTH CARE

Establishing context for each visit is essential. To save time during our visit, providing more time to address your concerns and work together on solutions, we invite you to complete our Context of Care form *prior to each visit*. If you are unable to do so, you can always arrive a few minutes before your visit & complete the form in-office.

What 3 expectations do you have from this visit?

- 1.
- 2.
- 3.

What are your top 3 health goals at this time?

- 1.
- 2.
- 3.

What is your current level of commitment to addressing any underlying causes of your symptoms/conditions?

least committed 0 1 2 3 4 5 6 7 8 9 10 most committed

Which of your current habits support your health?

Which of your current habits do not support your health?

What obstacles do you foresee in addressing the lifestyle factors which are impacting your health and ability to follow a prescribed treatment plan?

Who do you know that will sincerely and consistently support you with the lifestyle changes you will be making to improve your health?

What do you love to do?

