STANDARDIZED
HOMOEOPATHIC CLINIC

Medical History for Homoeopathic Treatment

Directions for a written submission

Introduction

1. For finding out a correct homoeopathic remedy, lot of information with regard to the (i) Complaints…..(a) main as well as (b) subsidiary….(ii) the person of the patient is required.
2. Incomplete information will make correct choice difficult. You are, therefore, requested to supply all the information without keeping back anything as irrelevant or of little importance. The information you supply in the note forms the basis of further enquiry designed to assist you in the further delineation of the problem. Full co-operation, therefore, is requested. All information supplied is, of course, strictly confidential.
3. Since the enquiry can be time consuming process and a lot of information is being collected, we require to record it systematically and, at times, we may find it necessary to administer to you further tests in which you are called upon to write out further.
4. We are sure you shall be fully co-operating with us in rendering you the best possible service.

Preliminary Information

Please supply the following information as standard routine: Name in full, Address, Date of birth, Sex, Status: Single/ Married Or Widow-ed Since/ Divorcee Since, Religion/ Community/ Sect, Vegetarian/ Non-vegetarian/ Eggs, Addictions, Tobacco, Chewing/ Smoking, Tea, coffee, Beer, Whisky and Liqueurs (please state the quantity consumed daily)

Educational career and qualifications. Occupation, current and previous with full description of responsibilities and job satisfaction, address and Tel no. Description of the current family set-up, full details pertaining to all the members, their ages, location, work they are doing and your relationship with responsibilities with them. Include in the list those who have died, stating the age of death, the year and the cause of the same.

Your daily routine from getting up in the morning to retiring at night. Include in this your dietary schedule furnishing full details in respect of the quantities consumed.

Financial Responsibilities and strains (present as well as past). Difficulties experienced, place of work/ family set-up/ social, give a full account.

Chief Complaint

Describe fully what bothers you the most. Each trouble should be detailed as under:

1. Full description of the trouble right from the time of onset. Its subsequent development and spread and response to treatments taken. This should give full idea of**:**
    i. Area affected Location, Extension, Direction of spread, the march of events.
    ii. Sensation experienced in the area of trouble.
    iii. Conditions that have brought on the trouble: examine the circumstances that obtained just before or at the time of onset paying attention to physical as well as emotional factors.
    iv. Conditions that increase the trouble or those afford relief.
    v. Other troubles experienced at the same time along with the main trouble for example…. perspiration/ nausea/ vomiting/ gas/ with pains.

Other Complaints

Describe here all other troubles you might be having or have in the past experienced. Each should be described fully as suggested above for the Chief Complaint.

Personal Data

Give a full account of the following:

i. Physical description of self.
ii. Emotional nature and intellectual attainments and aspirations. Indicate to what extent you have been able to realize them. Give a clear-cut picture of your relationships with the family members, friends and associations. Give a full idea of your responsibilities in life and what you feel about them.
iii. Reactions to surroundings:
    a. Food: desire and aversions, foods that do not suit, etc.
    b. General Environment: weather, temperature, bath, recreations, addictions etc.
    c. Sleep and Dreams.
    d. Sex (inclusive of menstrual and obstetric history).

Previous Illness

Give a resume of the illnesses you have had and to what extent these have any bearing on present troubles.

Family History

Data concerning the parents, brothers and sisters. State details concerning the health of wife and children.

General Comments

Include here any items, which have not been included above.

Enclosures

1. Medical reports and opinions of physicians.
2. Copies of reports of investigation done.
3. X- ray plates, ECG, MRI, CT scan etc.

Please write this form on a separate sheet and mail us at: **drjaniclinic@gmail.com** or post us at:

Standardized Homoeopathic Clinic

101, 1st Floor, Monarch Trinity Om Shanti CHSL,

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Maharashtra, India.

(The clinic is at a walking distance of 400m from Borivali West Metro Station)