



## New Patient Questionnaire

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

DOB: \_\_\_\_\_

Phone #: \_\_\_\_\_

1. What conditions are you looking to have assessed and treated?

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2. How did you hear about our practice?

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3. Have you ever worked with a Naturopathic Doctor before? If so, who?

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4. Naturopathic Medicine utilizes functional testing and nutraceutical supplements that are not covered by insurance. Consultation fees may also not be covered by insurance and are due at the time of service. (Please verify coverage prior to your appointment.) Do you have the financial resources available to you to cover out of pocket medical costs? (Please refer to our pricing and insurance page for further information.)

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# New England Naturopathic Health

5. Naturopathic Medicine is a collaboration between the doctor and the patient in which the patient does as much, if not more work than the doctor to heal. Are you willing to make changes to your lifestyle that will encourage the healing process?

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6. Do you have a primary care physician? Do you have a good relationship with your primary care doctor?

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7. What medical diagnosis have you received?

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8. NENH communicates with its patients through an electronic medical records system to maximize efficiency of our staff. Are you able to utilize email?

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