

HUMAN CHEMISTRY MEDICAL HISTORY TIMELINE

Timeline for:	(A)
Parent/guardian/conservator name (if applicable):	(B)
Date:	

Everything in the form below is about person A (the person being treated).

If you are being treated, you will be asked about your family history, your parents' health before you were conceived, your mother's state during her pregnancy with you, your own delivery and your own early history. If you are filling this out for your child/dependant, the questions will be about them (and if you are their mother, you will be asked about your experience during the preconception and conception period, your pregnancy experience and delivery of your child).

Early history - preconception to age 5 details of person (A)

	Description	Medication details
Family history (of parents, grand-parents, siblings, other family members if relevant) - Genetic diseases - Addiction, abusive incest, assault		
Preconception - Mother's health - Father's health		
Conception - Mother's previous miscarriages? - Circumstances: a planned baby? - Eldest child? - Alcohol, drugs, hormones/IVF/pill/coil, vaccinations, medications - Stress, sadness, e.g., loss of a twin in utero?		
Mother's pregnancy details - Medication - Contraction stimulator or inhibitor - Vaccinations incl travel - Blood loss: details - Acceptance by your parents - Emotional state		
Delivery - Natural or induced - Anaesthesia/epidural		

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- Position of baby - Placenta condition - APGAR score - Rhesus injection		
Birth weight and length/height		
Vaccinations - Which and when - Reaction		
Questions regarding early feeding period - Breastfed or formula? How long were you breastfed? - Difficulties with feeding? - If breastfed, name all medication for you (person A) or your mother (e.g., antibiotics, aspirin, paracetamol/acetaminophen, corticosteroids) - Surgical procedures (for you)		
First 4 years - Medication (e.g., antibiotics, aspirin, paracetamol/acetaminophen, corticosteroids) - Surgical procedures		

Growth Details - *this is to flag if there was anything unusual about early growth/development.*

Year/age	Height	Weight

General history from age 5 to present day

- Social interactions? - Relationship issues? - Marriage/divorce?		
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Medical history from age 5 to present day

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Questions for women: - What age did your menses begin? - Any contraceptives taken? - If so, which ones? - Between what ages? - Any menstrual problems, including ovulation?		
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Medical details from age 5 (include all vaccinations and travel vaccinations), traumas, accidents, surgeries and events that preceded a health issue or included a treatment

- Include all medications that you can remember (e.g., steroids, puffers, creams (steroid or anti-fungal), steroid eye drops, hormones, contraceptive pill, antibiotics, pain meds, anti-inflammatories, immune-suppressants, narcotics, metal or other poisonings, industrial chemicals or mould exposure, etc).
- Include all infections that are not the common cold (H. Pylori, E-coli, mono, parasites, STDs, etc.)

[illegible]

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Briefly list any previous homeopathic treatments: