

X-RAY QUESTIONNAIRE For Women Only

Our consultation and examination may indicate that x-rays are necessary to accurately diagnose and analyze your spinal condition. Should x-rays be necessary we would like to confirm that you are not pregnant at this time.

NAME: _____

_____ There is a possibility that I may be pregnant at this time.

_____ Yes, I am definitely pregnant.

_____ No, I am not pregnant at this time.

_____ I request that x-ray films not be taken because

SIGNATURE _____

DATE ____/____/____