

CHIROPRACTIC INITIAL PHYSICAL EVALUATION



☒ NO FAULT

☐ WORKERS COMPENSATION

☐ PRIVATE

Date of Exam: 6/19/23

Date of Injury: 6/10/23

Patients Full Name: AALIYAL BANKS

Address: 763 E. 82nd St Brooklyn NY 11234

Date of Birth: 07/08/1998

Gender: ☐ M ☒ F

The above mentioned patient presented him/herself today for an examination and treatment to this office due to persistent pain. This information was obtained from the patient by his/her own description.

Place/Location of Accident: 88th St Brooklyn 11234

☒ MVA, in which this patient stated that he/she was ☒ Driver ☐ Pedestrian ☐ Bike Rider ☐ Front Seat Passenger

☐ Left ☐ Right back seat passenger ☐ other _____

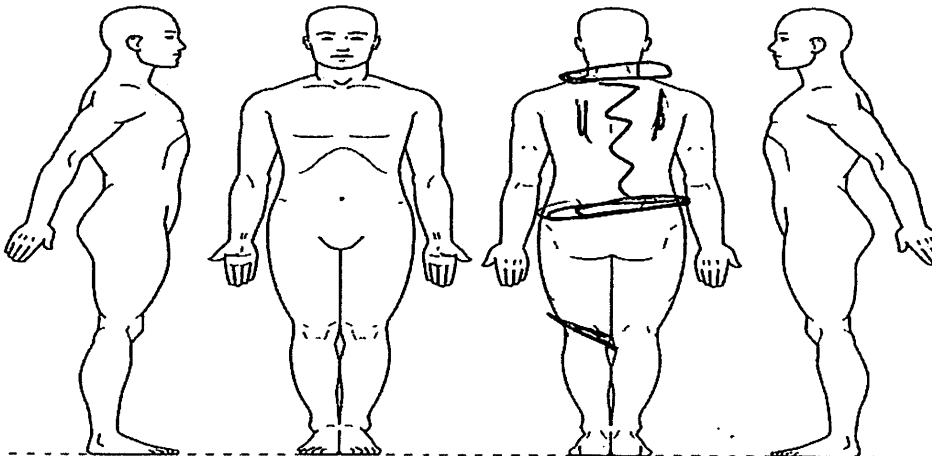
Wearing a seatbelt ☒ Yes ☐ No

Airbags Deployed ☐ Yes ☒ No

Impact on the car: front/rear/left side/right side

Accident Description: Car backed into her car

According to the patient he/she was in good state of health before he/she was involved in the accident and did not experience any current symptoms before the accident. Please circle the current symptoms below.



NP Radiates
to interscapula
especially C5/T1

NP radiates
interscap. C5/T1
LBP