

# Healthy Body Coaching

## PERSONAL & CONFIDENTIAL HEALTH HISTORY QUESTIONNAIRE

Please complete all sections of the questionnaire that pertain to your health concerns. Doing so will help me, your Wellness Consultant, to more thoroughly understand your specific needs. All of your answers will be held absolutely confidential. If you have any specific concerns, please ask. Thank you.

### Personal Information

Last Name:		First Name: (Mr. / Mrs. / Ms.)		M.I.
Street Address:			Apt. /Suite:	
City:	State:		Postal Code:	
Home Phone:		Cell Phone:	Fax:	
Email:		Website:		
Date of Birth:		Occupation:		

### Chief Complaint/ Vital Signs

Main reason for visit? (i.e., more energy, lose weight, specific challenges, etc.)	How long have you experienced this challenge/ When did it begin?
Experiencing physical aches/ pains? Where?	When did it begin? Sudden onset or gradual?

Please list any dietary or nutritional restrictions:	
Please list <b><i>everything</i></b> you have consumed in the <b><i>past 48 hours</i></b> (food, drinks/alcohol, medication/ drugs, inhalants, tobacco, snacks/treats)?	<p>Is this reflective of what you usually eat?</p> <p>What are you willing to give up?</p> <p>Why?</p>

**\*Please indicate your level of commitment to creating wellness and improving your health by telling me WHY you know you MUST create a change NOW. What will it cost you if you don't change?:**

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## AUTHORIZATION

LIVE BLOOD DEMONSTRATION AND  
MYCOTOXIC OXIDATIVE STRESS TEST



**RICK PANSON**

**MICROBIOLOGIST**

Live & Dry BLOOD Analysis

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www.rickpanson.com

212-533-5256

### **Don't Believe a Word I Say! (nor what I write)**

**In the world of health there are many people saying many conflicting things, it's confusing.**

**Just because someone says something, that doesn't make it TRUE, but, if you try what someone suggests and you get great results... there you might find your truth.**

### **The good, old US FDA Disclaimer**

The ideas, concepts, theories, products and the claims made about specific products on or during this blood cell analysis have not been evaluated by the US Food & Drug Administration and are not approved to diagnose, treat, cure or prevent disease. None of it means anything at all, it's all simply jibberish.

The information provided is for informational purposes only and is not intended as a substitute for advice from your physician or other health care professional or any information contained on or in any product label or packaging. You should not use the information for diagnosis or treatment of any health problem or for prescription of any medication or other treatment.

### ***\*PLEASE READ CAREFULLY BEFORE SIGNING\****

I recognize that parts of this demonstration are not yet approved by the allopathic medical profession or the Food and Drug Administration, although they have not been rejected either. I acknowledge that this is not a direct diagnosis for treatment, care, alleviation, mitigation, or prevention of any disease of any kind in any way. However, I reserve the right to use the information I gain in the care of my own body and emotions, including suggestions based on the results. I understand that Rick Panson is not a physician nor a psychologist nor psychiatrist- nor does he hold himself out to be one. Rick is a Microbiologist and a Natural Health and Wellness Educator with a specialty in cellular hydration teaching about Natural Law, proper eating, supplementation, exercise, and other lifestyle enhancements. No claims are being made for a need to have FDA approval. As a matter of fact, "Don't believe a word Rick says". Just because someone says something doesn't make it true; check for yourself and if you get desirable results then you can know truth. I understand that the lifestyles learned are no substitute for medical treatment. For any medical problem or condition, it is important for one to consult his/her physician, especially if one has medical treatment underway or completed. I clearly understand that diagnosis or treatment of any kind for any disease is outside the scope and practice of Rick Panson and these blood demonstrations. I hereby attest and affirm that I am here as a client/student, on this and any other subsequent visit, solely on my own behalf, and not as an agent on a mission of entrapment (or any other investigative purpose) for any federal, state, or local agency.

I, \_\_\_\_\_, hereby authorize (**Healthy Body Coach/Rick Panson**), to perform live and dried blood demonstrations. **I understand that this in no way will diagnose, treat, cure or remedy any illness. It is further understood that this demonstration will be used for educational purposes only and no medical opinion is being expressed, nor is any medical advice being sought nor given by the microbiologist.**

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Date of Birth**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Today's Date**