## Atlanta Natural Health Clinic 4633 Buford Hwy. Atlanta, Ga. 30341 770-455-6767

## **New Patient Introduction Form**

**Patient Name:** 

Date:

1. Chief Concerns:

2. Medications and/or Nutritional Supplements currently on:

3. Dietary Intake for 2 days before appointment:

Breakfast:	Breakfast:
Snacks:	Snacks:
Lunch:	Lunch:
Snacks:	Snacks:
Dinner:	Dinner:
Snacks:	Snacks: