

PRIVATE CLIENT INTAKE FORM

Name

Date

Please answer to the best of your ability. We'll review this information together in your Intake Appointment. Please send completed form to siva@ayurvedabysiva.com before your Intake. In case you're wondering, we'll meet online at www.ayurvedabysiva.com/videomeeting/

GETTING TO KNOW YOU

What are your goals with Ayurveda lifestyle?

What is your definition of feeling good, or healthy, in your mind and body?

What are your biggest blocks to feeling good in your mind and body?

What are your biggest supports, and successes, in feeling good in your mind and body?

Family Dynamics & Childhood

Please describe yourself as a child. What were the predominant feelings you had as a child?

Please describe your family structure, and dynamics, while “growing up.”

Please describe your current family, and living situation.

HEALTH PATTERNS

Long Term

Here is a list of common patterns in the body and mind. You can highlight/circle, signs that you believe are your default, or overarching patterns, or simply delete/cross out the ones you do not. DON'T SUBTOTAL - That's my job.



LONG TERM BODILY FUNCTION TENDENCIES

Appetite	fluctuating; get full quickly; tend to not really ever get physically too hungry and can just graze; forget to eat; get lightheaded or dizzy without food		strong; irritable and angry if not fed; need meals and snacks; need full meals to stay full		low; could eat one meal a day; no am appetite; like to eat sweets late at night
Sleep Patterns	light sleep; frequent night waking; restless		tough to turn the mind of to fall asleep; solid sleeper; alert upon waking; wake before alarm; hot at night		love being up at night alone; tough am wake; foggy mind in am; thick heavy sleep
Skin Patterns	dry; flaky; discolored; dull; T-zone combination skin on face; blackheads		red undertone; prone to inflammation/irritation; pimples; rash prone; oily		smooth; oily; deep cysts or blemishes; whiteheads
Body Temperature	usually feel cold; cold hands and feet; crave heat		usually feel hot; heat intolerant		neither extreme; prefer cool climate but adapt easily
Speech Patterns	effusive; exuberant; tangential; fast		clear; direct; logic based; point driven		slow; don't say much
SUBTOTAL	VATA		PITTA		KAPHA

MIND & EMOTIONAL CORE FEATURES

Personality Traits	<p>artistic</p> <p>charismatic</p> <p>interested in the "new"</p> <p>love to stay busy</p> <p>need to travel</p> <p>embody extremes</p> <p>low follow through</p> <p>lots of ideas</p> <p>Impulsive decisions</p> <p>changeable</p>		<p>natural leaders and teachers</p> <p>love to learn about <i>how</i> things work or <i>why</i></p> <p>tend to be more cerebral than emotional</p> <p>ideals & "shoulds"</p> <p>detail oriented</p> <p>concerned with efficiency, productivity, cost-effectiveness</p> <p>read consumer reviews</p> <p>logical decisions</p>		<p>mellow, more quiet</p> <p>stay in jobs, homes, relationships for long</p> <p>don't often initiate</p> <p>hesitant to change</p> <p>Passive</p> <p>prefer supportive roles</p> <p>hold deep attachments to people and things</p> <p>Loyal</p> <p>Good listeners</p>
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LONG TERM MIND & EMOTION TENDENCIES

Adaptability	high; in fact usually the cause for need to		fair; ok to change course or decision with good		low; prefer to stick to the plan or not shift; take a
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	adapt is a change in your mind/decision		reason; intolerant of flakiness		long time to get comfortable with change	
Response to Stress	get overwhelmed/ intimidated and escape; perhaps never really address the problem and stay distracted		great; do well under pressure; come up with solutions and resolve the problem		withdraw and isolate; need to be alone to contemplate or insulate with food/ sleep	
SUBTOTAL	VATA		PITTA		KAPHA	
TOTAL	VATA		PITTA		KAPHA	

How was your health as a child? Have you had any noteworthy health issues in the past?

How is your health as an adult? Any chronic patterns you've noticed in your body?

What are the more vulnerable parts of your body - more prone to ailments or challenges? Any relevant family health history?



Which aspects of your body feel really good?

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More Recent

What supplements, or medications are you taking?

Name	Dosage & Duration	Benefits

Here is a list of common signs of imbalance in various parts of you. You can highlight/circle, signs that you have, or simply delete/cross out the ones you do not have. DON'T SUBTOTAL - That's my job.

CATEGORY	VATA SIGNS <i>deficiency, irregularity, degeneration</i>	PITTA SIGNS <i>inflammation, infection, heat</i>	KAPHA SIGNS <i>accumulation, stagnation, congestion, growth</i>
Emotional Body	overwhelm anxiety & worry hypersensitivity extreme emotions internal conflicts cycling emotions	irritability short-temper anger jealousy resentment frustration	sadness wanting to be alone psychological baggage holding on to grudges depression crying
Mind	reactive trouble sleeping indecision restlessness difficulty focusing difficulty completing racing thoughts impulsive choices addictive tendencies	intensity focusing on problems activated to solve overworking pressured to-do list mania overanalyzing (self) critical impatience righteousness	unmotivated unclear dull stubborn unmotivated tough am wake



NONPHYSICAL SUBTOTAL	VATA		PITTA		KAPHA	
Digestion	gas, gurgling, bloating belching cramping, spasm constipation dry, small stools straining low appetite		hyperacidity increased appetite > 2 BMs/day loose stools narrow stools mouth sores		sluggish digestion poor am appetite low physical hunger mucus in stool nauseous in am heavy after eating	
Immunity & Blood	low immunity allergies food sensitivities cold hands and feet feeling cold headaches - vasospasm		feeling hot flushed face, ears headaches- tension gout herpes outbreaks Inflammation tendency		not temperature sensitive elevated blood sugar swollen feet/ hands	
Skin	dry, flaky discolored, dull blackheads dry, itchy skin dry cuticles		red undertone inflamed red acne rash or hive prone		smooth oily whiteheads deep acne cysts	
Sinuses & Respiration	dry, cracked lips dry sinus membranes runny nose dry throat dry, itchy eyes		sinus infection bloody nose/ mucus respiratory allergies		congestion am phlegm post nasal drip clogged ears headaches - sinus pressure	
Nerves & Adrenals	trouble sleeping dark circles under eyes		spend a lot of time in "get-it-done" mode		slow responses over sleepy weight gain	
Muscles, Joints & Mobility	pain stiff creaky joints worse in am tremor unsteadiness in movement		inflamed muscles and joints worse after use		swollen ankles swollen, cool joints joint pain with rain slow movement	
Kidneys & Urination	urinary frequency		frequent urinary tract infections		Bladder/kidney stones Cloudy urine	
Sexuality & Reproduction	extreme sexual frequencies and practices after time, no libido dry tissues		frequent yeast infections with burning		slow to rise libido, sluggish orgasm excessive discharge yeast infections with less symptoms	



	irregular menses uterine cramping		STDs		heavy menses dark, clotted menses fibroids, polyps ovarian cysts enlarged prostate	
PHYSICAL SUBTOTAL	VATA		PITTA		KAPHA	

RELATIONSHIP PATTERNS

Who are the people with whom you spend the most time or energy?

How do your major relationships feel?

Are you aware of any patterns across relationships you'd like to change?

Are you able to be vulnerable and express challenging feelings and thoughts? Are your relationships emotionally intimate?

Do you feel well supported? Valued? Heard?



FOOD PATTERNS

Please describe your approach to food.

What kinds of foods do you typically eat? And which foods do you avoid?

What patterns do you struggle with in relation to food, and digesting?

CAREER & DHARMA

What do you “do” as your work, study, or main forms of interaction with others, and do you enjoy it? Do you feel you are sharing your gifts? Is there something you would rather be “doing?”



SELF CARE PATTERNS

How do you show up for your goals?

Do you have any routines? Please describe them.

What are your regular Self Care practices, and how often do you practice them?

What are ways in which you prioritize your emotional wellness?

RESPONSE TO STRESSORS

What are the major stressors in your life, and why?

What are your most effective stress reducing tools?



What percentage of your waking time do you spend in “get it done” mode?

Do you feel financially stable? If not, what would allow you to?

If there is anything that we haven't yet touched upon, which you feel is relevant to who you are today, and your feeling better, please share here.

INFORMED CONSENT

Ayurveda is a natural healing system that has been successfully practiced for thousands of years. Originating in ancient India, this medical tradition states that each person's path toward optimal health is unique—because each person is unique. The individualized healing programs offered at Ayurveda By Siva, Inc. (“Ayurveda By Siva”), are based on time-honored principles that focus on helping the practitioner in understanding their particular body-mind constitution. The goal of Ayurvedic counseling is to create within the practitioner's body and mind a receptive environment for healing to take place and to support the body's ability to heal itself.

During the course of Ayurvedic counseling and education with Ayurveda By Siva, we may provide or recommend lifestyle adjustment, dietary changes, herbal supplements, aromatherapy, yoga, and other natural therapeutic activities for various conditions. In order to implement these Ayurvedic principles into your life, frequent and regular follow-up visits over a six to twenty-four month period are recommended.

Although Ayurveda is generally considered safe, like any therapeutic program, there may be risks associated with the recommended program as a whole or with components of the program. Herbs and dietary supplements (which are from plant, animal, and mineral sources) that may be recommended by Ayurveda By Siva are traditionally considered safe, however, they may cause allergic reactions in some people. Additionally, some herbs and dietary supplements may be inappropriate during pregnancy or while nursing. Finally, herbs and dietary supplements may interact with prescription or over-the-counter medication, or other supplements. **Therefore, you should always consult your doctor before taking any herbal or dietary supplement, and notify all your other healthcare providers, including pharmacists, who can keep track of potential drug interactions.** Various natural therapeutics, such as aromatherapy and yoga, are also generally considered safe, although there are, of course, risks associated with each. As with many physical activities or natural therapy programs, you may experience physical exertion, discomfort, faintness, or dizziness. You should consult your doctor before beginning any natural therapy program.



Should you experience an allergic reaction or any unexpected or unpleasant effects as a result of taking a supplement or participating in an activity recommended by Ayurveda By Siva, you should stop taking the supplement or participating in the activity and **immediately** contact your doctor. It is your responsibility to notify Ayurveda By Siva and your health care providers: if you have or develop any physical or medical condition; if you have any change in an existing physical or medical condition; or if you are, become, or plan to become pregnant, or if you are nursing.

You understand and agree that: None of the Statements made by Dr. Mohan or by any other Ayurveda By Siva employee or agent about any herb, supplement, activity or service has been evaluated by the FDA. No Ayurveda By Siva product, activity or service is intended to diagnose, treat, cure, or prevent any disease. All information and material provided by Svastha Health is strictly for informational and educational purposes only.

Ayurveda is considered a complementary and alternative medicine by the State of California, and Ayurvedic practitioners do not require a license or certification to practice. Ayurveda By Siva is not a Medical Facility and is not a licensed health care provider. Although Dr. Mohan has a medical degree from Cornell University, she is not practicing Western (allopathic) medicine at this time and is not currently maintaining a license to practice medicine. Your work with Ayurveda By Siva is designed to complement, but not take the place of, the care provided by your other healthcare providers.

Consultation with Dr. Mohan does not take the place of a medical evaluation, diagnosis, or treatment; and Dr. Mohan will not diagnose medical conditions or provide medical care. Consultation may not cover every health-related matter or every possible health-related issue. Additionally, no one associated with Ayurveda By Siva may recommend altering your medical prescriptions, without the approval of your doctor. Should you experience relief from an existing ailment, you must consult your doctors before foregoing or modifying any treatment your doctors have recommended to you. If during an examination by Ayurveda By Siva, there are any findings suggestive of an unevaluated medical condition, you may be referred to a Western physician. The fact that findings could result in a referral is not a guarantee or assurance that any medical conditions will lead to findings and does not place any obligation on Ayurveda By Siva to identify or evaluate any medical condition or to act on any findings of a medical condition.

Results of Ayurvedic programs vary and depend upon many factors including the individual's body, mind, and commitment to Ayurvedic principles. Ayurveda By Siva does not guarantee the results of any individual therapeutic procedure, herbal or dietary supplement, lifestyle change, or the recommended Ayurvedic program as a whole.

By voluntarily signing below, and in consideration of my participation in the Ayurvedic program, I agree to indemnify and hold Ayurveda By Siva harmless from any liability for injury or death of any person and for any damage to property caused by, in whole or in part, my negligent or intentional acts or omissions. I, hereby, confirm that I have carefully read and understand this entire Informed Consent and understand that by signing below I further confirm that I have been told about the risks and benefits of an Ayurvedic program, and have had an opportunity to ask questions. I do not expect Ayurveda By Siva to be able to anticipate and explain all possible risks and complications of an Ayurvedic program, and I will perform my own research and investigation into risks associated with any and all features of any such program. I intend this Informed Consent to cover the entire course of counseling and recommended Ayurvedic program(s) provided by or through Ayurveda By Siva.

Client Signature

Date

APPOINTMENT POLICIES

Fees are due in full at time of service. Current prices, and service detail, can be found on our website.

We require a credit card on file for all clients, as a default form of payment. Missed appointments are charged the price of the appointment. Cancellation under 24 hours incurs a \$60 late cancel fee. I understand and agree to the above Fees and Payment policies.

Client Signature

Date

