

**PARENT QUESTIONNAIRE  
PHYSICAL THERAPY SERVICES**



**Please return as soon as possible.**

The information you give us will help us to understand your child and to better plan for his or her visit. Not all questions may apply to your child. **Please print a copy, complete and fax or mail as soon as possible to your clinic. If you do not send ahead of time, please bring completed form with you to the evaluation.**

Child's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Parent/Guardian names: \_\_\_\_\_

1. What are your goals for physical therapy services?
2. Did your child experience any complications during pregnancy, birth or infancy? If yes, please describe.
3. Has your child been able to roll, sit, crawl, walk, run, and jump as expected for their age?
4. Has your child experienced any significant medical conditions, injuries, or illnesses? Please list.
5. Does your child currently receive any therapy services or have they received services in the past?
6. Is your child being followed by any specialists (i.e. neurology, orthopedics, oncology)
7. Is your child physically active? What activities does your child enjoy?

8. Do you have any concerns about your child's overall health and nutrition?
  
9. How much sleep does your child get each night?
  
10. Who lives in the home with the child?
  
11. Does your child attend daycare/school?
  
12. Is there anything else you would like us to know about your child?

**Please return this questionnaire before your appointment** to help us plan a thorough evaluation. It may be returned in person, by mail, or by fax to:

**Maple Grove**, 7767 Elm Creek Boulevard, Suite 300, Maple Grove, Minnesota 55369 Phone: (763) 416-8700 **Fax: (763) 416-8701**

**Minneapolis**, 2530 Chicago Avenue South, Minneapolis, Minnesota 55404  
Phone: (612) 813-6709 **Fax: (612) 813-6593**

**Mnnetonka**, 5950 Clearwater Drive, Suite 500, Minnetonka, Minnesota 55343  
Phone: (952) 930-8630 **Fax: (952) 930-8640**

**Roseville**, 1835 West County Road C, Suite 130, Roseville, Minnesota 55113  
Phone: (651) 638-1670 **Fax: (651) 638-1675**

**St. Paul**, 345 North Smith Avenue, St. Paul, Minnesota 55102  
Phone: (651) 220-6880 **Fax: (651) 220-7299**

**Woodwinds**, 1825 Woodwinds Drive, Suite 100, Woodbury, Minnesota 55125  
Phone: (651) 232-6860 **Fax: (651) 232-6766**