

Patient Success Stories

Occupation

Testimonials allow us to let others in the community know about the tremendous results and benefits that chiropractic care can provide. Please take a few moments to share your successes with others. You never know who will read your story, begin care here and have their lives dramatically improved as a result of reading your testimonial.

Please explain your personal story by answering the questions below.

1. What symptoms/conditions (and severity) were you experiencing when you first started care?
2. How did these issues affect your life? (ex. Loss of work, couldn't exercise or do hobbies, attitude, relationships, etc.)
3. What had you tried before you started care here? (medical treatment, medications, physical therapy, surgery, etc.)
4. What improvements have you noticed with care here? (less pain, less medication, more energy, better sleep, playing with children/grandchildren, more productive at work/home, etc.)
5. What has impressed you the most about your care in this office?
6. Would you recommend care in this office to others?

I hereby give my permission for all or any part of my written/video testimonial to be used by Chiropractic Works in the interest of telling others about the benefits of chiropractic care.

Printed Name

Signature