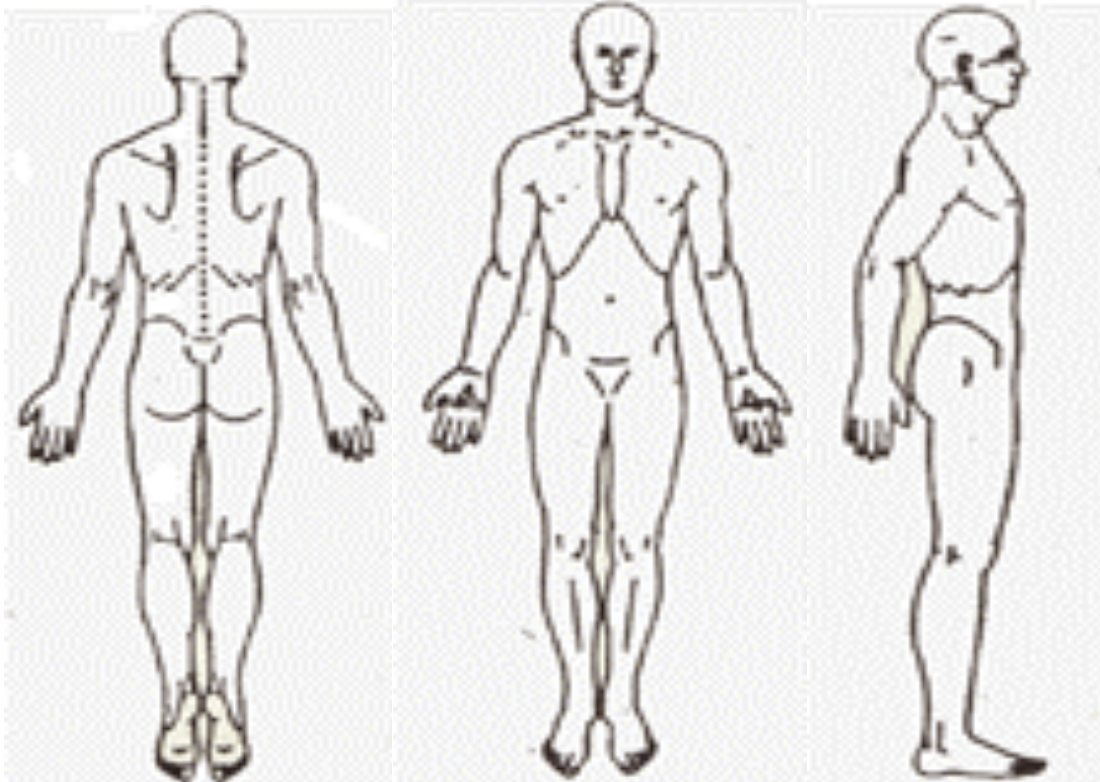


Please indicate, if any, the areas in which you are feeling discomfort:



What are your goals/expectations for this therapy session?

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