

# LIFE EVENT TIMELINE

This form is designed to assist you in identifying significant life and health events in chronological order.

*Life events might include:* Births, deaths, marriage, divorce, relationship changes, employment changes, bankruptcies, moves, crimes perpetrated against you, etc.

*Health events might include:* Illnesses, medication trends (i.e. extended use of antibiotics, anti-depressants, etc.), hospitalizations, injuries, surgeries, medical/health traumas, etc.

Please specify the age and list as many events in each age range that occurred. Use additional paper if needed.

Age	Brief Description of Event	Medical Intervention or Support	Perceived Outcome	Medical use only
0-5 <i>Example:</i> 4 yrs	fell off swing set and broke arm	ER, cast - scary	ruined summer and temporary fear of climbing & falling	
6-10				
11-14				

Age	Brief Description of Event	Medical Intervention or Support	Perceived Outcome	Medical use only
15-19				
20-25				
26-29				

Age	Brief Description of Event	Medical Intervention or Support	Perceived Outcome	Medical Use Only
30-39				
40-49				
50-59				
60+				