



Ascent Health

CONSENT FOR CARE

CHIROPRACTIC FUNCTIONAL CARE. This consent outlines our practices, policies, and your consent to care. Chiropractic is a branch of the healing arts focused on supporting the body's natural function and healing and includes evaluation, diagnosis, and treatment through adjustment, nutrition, physical therapy, remedial measures, massage, and other therapies. In our functional care model, we view health as a continuum from optimal health, to hidden imbalances, to disease. Our care is intended to develop and implement an overall health-support program and monitor progress in achieving goals. We address underlying metabolic and physiologic imbalances, intervening at root causes to support the body's return to health. Our consultations, evaluations, testing, and recommendations (including lifestyle modification, nutrition, and nutritional supplementation) pertain to the functional health/whole body concept.

RISKS. Chiropractic, including functional care, is generally considered safe; however, all health care involves risks. If you receive one form of health care to the exclusion of others, you risk not having your health conditions fully diagnosed or addressed. To minimize risks, you agree to report all conditions, medications, and pregnancy. This includes, without limit, prior surgeries and implants; accidents; broken bones; osteoporosis; spondylolisthesis; spinal stenosis; infection; tumors; malignancy; cellulitis; wounds and skin conditions; allergies; deep vein thromboses; pneumothorax; emphysema; diabetes; hypoglycemia; visual conditions; barotrauma; seizures; heart conditions; mental/emotional conditions; pain; adverse effects of any treatment; and all medications and supplements. Additional significant risks of chiropractic interventions include:

- **Adjustment; Physical Therapy and Remedial Measures; Cryotherapy; Diathermy** involve moving and altering body structures and temperature. Risks include fractures, disc injuries, dislocations, cervical myelopathy, increased pain or irritation, burns, swelling, spasms, dislocations, separations, strains and sprains. Additionally, underlying conditions put some patients at risk for stroke or vascular injuries. Cervical adjustments have been associated with injuries to the arteries in the neck leading to serious complications including stroke.
- **Applied Kinesiology; Biofeedback; and Neuroemotional Technique** help evaluate structural, chemical, and emotional health using patient history, muscle testing and other diagnostic techniques (neuro-mechanisms of manual muscle testing, emotions, acupuncture meridians, reflex points and physiology). It involves risks to include increased symptoms.
- **Dry Needling** uses a sterile, fine needle to insert into a muscle to help relieve pain. It involves risks including pneumothorax (lung collapse), bleeding and bruising.
- **Electrical Stimulation** delivers an electronic impulse and involves risks including pain, muscle spasms, cramps.
- **Nutritional Measures, Dietary Supplements, Vitamins, Minerals, Herbs, and Other Nutrients** are used to support function and return to homeostasis; however, they involve risks including changes in blood sugar, gastrointestinal upset, allergic reaction, and toxicity, which can be life threatening. They may interact with drugs and be inappropriate in pregnancy.

RISKS AND CONSENT FOR UNPROVEN TESTS AND PROCEDURES. Certain procedures and diagnostic tests used in chiropractic are "unproven." This means that effectiveness has not been demonstrated and there is increased risk of not having your health conditions fully diagnosed or addressed when using such tests or procedures. Procedures specifically designated as unproven by Colorado's Board of Chiropractic Examiners are listed below. Unfortunately, the Board does not identify any specific test that it designates as "unproven." As such, you should presume that all tests performed at this office are designated as "unproven" by the Board. This includes, without limit, testing of saliva, stool, food chemical sensitivity, skin, biomarkers, and functional blood chemistry. Understanding that such procedures and tests are designated as unproven, you elect to proceed as evidenced by your signed consent below.

- **Contact Reflex Analysis** is technique used to analyze the energy that flows through the body and determining the nutrition the body needs.
- **Iridology** is a technique that examines iris patterns, colors, and characteristics to determine information about systemic health.
- **Laser Therapy** delivers specific wavelengths of laser light and involves some risk, including compromise of thyroid function, damage to vision, and stimulating proliferation of existing abnormal cells. Its effects on a fetus are unknown.
- **Neurofeedback** is meant to help with regulation of brain function by providing positive and negative feedback. Risks include anxiety, cognitive impairment, chattering teeth, fatigue, depersonalization, depression, dizziness, headaches, internal vibrations, low energy, muscle tension, vocal changes, or worsening symptoms.

- **Oxygen therapy** delivers increased concentrations of oxygen and involves risks including visual changes, cataract maturation, claustrophobia, hypoglycemia, barotrauma, oxygen toxicity seizures, and decompression sickness.
- **PowerPlate** involves whole body vibration, triggering muscle fibers to engage during exercise. It involves risks to include increased symptoms, falls, fractures, disc injuries, dislocations, increased pain or irritation, swelling, spasms, dislocations, separations, strains and sprains.
- **Pulsed Electromagnetic Field (PEMF)** uses magnetic energy that passes through tissue and involves risks including pain, nausea, and dizziness. PEMF is contraindicated in patients with an implants (pacemaker, defibrillator, cochlear hearing, insulin pump, etc.) and in patients who are pregnant, have active bleeding (e.g. heavy menstruation), or have blood clots.
- **Stem Cell therapy** involves injecting stem cells into joints or other body tissue and has risks including infection, increased pain, and nerve or tissue damage.
- **Reams** is meant to analysis the body's electro-biochemical structure and reveal physiological dysfunctional patterns to allow a provider to recommend various nutritional and lifestyle measures.
- **Reflexology** is intended to stimulate certain points with finger pressure to promote health in organs and glands via the body's energetic pathways.
- **Ultrasound** to diagnose paraspinal muscle inflammation, posterior joint swelling, nerve root inflammation, or other spinal pathology.
- **Methylenetetrahydrofolate reductase (MTHFR)** involves identifying a genetic mutation that may lead to high levels of homocysteine in the blood and providing nutritional supplementation. Risks of such supplementation includes changes in blood sugar, gastrointestinal upset, allergic reaction, and toxicity, which can be life threatening, and may interact with drugs and be inappropriate in pregnancy.
- **Practices that promote spiritual growth, comfort, or well-being.**

ALTERNATIVES: Alternatives include declining our services and consulting other providers. Our services are not provided by medical doctors and are not intended to replace medical care. We do not prescribe legend drugs and all changes to prescription medications must be made by your prescribing provider. Never stop or change a medication without first talking to your prescribing provider. We encourage you to consult with other providers and to inform them about the care you receive in this office.

PRIVATE CONSULTATION: You may be seen by a doctor of chiropractic, another licensed provider, or an unlicensed assistant who provides services under supervision. You may request a consultation with the doctor of chiropractic at any time and will be afforded the opportunity for a confidential conversation in a private space.

NO GUARANTEE: Like all other health care, results are not guaranteed. Every individual responds to care differently and no guarantee or assurance is made as to the results or outcome of care, or the cure of any condition, as care may not improve your condition.

PAYMENT, INSURANCE & REFUND POLICY: Payment is not conditional on response to care. We do not accept insurance and there is no guarantee or representation about insurance coverage for any services. Insurance is an agreement between you and your insurance carrier and you are responsible for payment of services, whether or not they are covered by insurance. Prorated fees for unused, prepaid services will be refunded if you wish to cancel; however, no refunds are available for products purchased or services rendered.

DO NOT SIGN UNLESS YOU HAVE READ AND FULLY UNDERSTOOD THE INFORMATION PROVIDED ON THIS FORM! I have read and understand this consent, and understand that I should not sign if any of my questions have not been answered.

Patient or Person with Authority to Consent

Date