

DECLARATION AND CONSENT FOR NATUROPATHIC CARE

As a naturopathic doctor (ND) I will conduct a thorough case history, a physical exam and may utilize specific blood, urinary or other laboratory reports as part of the treatment work-up. I integrate supportive therapies like nutrition, botanical medicine, acupuncture, homeopathy, physical medicine, intravenous (IV) therapies, perineural injection therapy, prolotherapy, neural therapy and lifestyle counselling to assist the body's innate ability to heal itself and to improve quality of life and health through natural means.

Clinical Nutrition Individual diets and nutritional supplements are used to address possible imbalances and/or deficiencies, to treat and/or prevent illness, and to improve overall health. This may include recommendations of inclusion and/or avoidance of particular foods, and the use of nutritional supplements that may include vitamins, minerals and/or other nutrients, plant and/or animal matter, enzymes, or amino acids.

Lifestyle Counselling involves identifying lifestyle factors that may be negatively impacting your health. This may include identifying risk factor for illness and providing recommendations for reducing your risk.

Botanical Medicine refers to the use of plant-derived products in the treatment and/or prevention of illness and can include teas, tinctures (alcohol based preparations), baths, topical applications (creams, ointments, etc.), capsules or tablets.

Homeopathy refers to the use of minute doses of plant, mineral and/or animal matter to treat and/or prevent illness.

Intravenous (IV) Therapies are used as an effective means of delivering nutrients through the veins. In this way absorption is ensured and the therapeutic dosage can bring quicker results. Several different types of intravenous therapies may be utilized including vitamin C therapies, Chelation therapy, among others.

Acupuncture is the insertion of very fine sterile needles into specific points in the skin and underlying tissues to relieve symptoms, improve health and balance the body's energy and organ systems.

Prolotherapy is a series of injections of safe solutions facilitating the healing of tendon, ligament and joint injuries. The treatment promotes the growth of normal cells and tissues, reducing pain and improving normal function and mobility.

Perineural Injection Therapy (PIT) is an non-pharmaceutical injection therapy which targets painful and swollen peripheral nerves with buffered 5% dextrose (sugar) in sterile water for the purpose of pain relief, reduced swelling and improvement of mobility.

Neural Therapy is the injection of local anesthetic (1% procaine) into identified interference fields such as scars, acupuncture points, trigger points and other tissues to relieve pain and improve function throughout the body.

Physical Medicine Refers to the use of hands-on techniques that can include spinal/joint manipulation, massage and hydrotherapy.

STATEMENT OF ACKNOWLEDGEMENT

I have read the information and understand that the form of medical care is based on naturopathic and other supportive principles and practices. I recognize that even the gentlest of therapies potentially have their complications. The information I have provided is complete and inclusive of all health concerns including the possibility of pregnancy and all current medications, including over-the-counter drugs. **Slight** health risks of some naturopathic treatments include, but are not limited to:

- temporary aggravation of pre-existing symptoms
- allergic reaction to supplements, herbs or injection therapies
- pain, fainting, bruising or injury from venipuncture, acupuncture or injection therapies
- muscle strains and spasms, disc injuries from spinal manipulations

✓ Any treatment or advice provided to me is **not mutually exclusive** from any treatment that I may now be receiving or may in the future receive from another licensed healthcare provider. I am at liberty to seek or continue medical care from a medical naturopathic doctor or other healthcare providers. I understand results are not guaranteed.

✓ I do not expect the naturopathic doctor to be able to anticipate and explain all risks and complications. With this knowledge, I voluntarily consent to diagnostic and therapeutic procedures mentioned above.

Exceptions to diagnostic and therapeutic procedures

I want to wear my own robe

✓ I understand that a record will be kept of my visits. This record will be kept confidential and will **not be released** without my consent. I understand that I may look at my medical records at any time and can request a copy of them.

✓ I am responsible for **payment at the time services are rendered**. Dispensary items must be paid for in full before leaving the office.

✓ I am aware this is a **24 hours cancellation policy**. Any missed appointments will be charged 100% of the visit fee.

✓ I understand that the naturopathic doctor reserves the right to determine which cases fall outside of her scope of practice, in which case the **appropriate referral will be recommended**.

✓ I have read and understand the above stated policies and information. This consent form is intended to cover the entire course of treatments in this office. I consent to receive naturopathic treatment from the naturopathic doctor. I understand this consent is voluntary and may be revoked at any time.

Patient's name

Margaret Mead

Email

ildikopap@yahoo.ca

Email correspondence

Yes

Email newsletter

Yes

Parent's / legal guardian's name

John Smith

Signature

