

Informed Consent for Physical Medicine Manipulation and Physical Medicine Therapies

The performance of Physical Medicine Manipulation includes various modes of hands-on or device manipulation that may result in an audible pop or click and a sense of movement within the joint space. Other Physical Medicine therapies that may be applied include ultrasound, electrical stimulation and/or thermal therapies.

Your treatment will be performed by a Naturopathic physician trained in Physical Medicine Manipulation and other Physical Medicine therapies.

I will inform my practitioner if I am pregnant, have a cardiac pacemaker or other implanted electronic device or skin condition that may contraindicate use of electrical stimulation therapies. The benefits of Physical Medicine Manipulation and other Physical Medicine Therapies are pain reduction or elimination, improved joint mobility, better posture and general wellness.

Risks:

- stiffness, soreness and or bruising
- disc injuries
- dislocations
- muscle strain
- cervical myelopathy
- dizziness, loss of consciousness
- fractures
- stroke
- burns

Alternatives:

Alternatives may include self-administered over-the-counter analgesics, rest and prescription drugs such as anti-inflammatory, muscle relaxants and pain-killers, hospitalization and surgery. These alternatives have been reviewed with me by my doctor.

I have read this Consent Form and have had my questions answered about potential benefits, risks and alternatives to my satisfaction and consent to treatment.

Date: _____

Patient Name: _____ MR: _____

If signed by representative, indicate relationship: _____

Patient/Representative Signature: _____