Snider Performance + Spine

1922 E. Matthews Ave.

Jonesboro, AR 72401

Patient Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SS# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Clinic ID#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Admit. Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PATIENT INFORMED CONSENT FORM

Congratulations on choosing Chiropractic Health Care. This clinic believes it is the safest, most natural health care delivery system in the world today. Chiropractic adjustments (Chiropractic Manipulative Therapy; C.M.T.) and other care procedures are safe and cost effective.

All health care professionals (anesthesiologists, chiropractors, dentists, medical doctors, osteopaths, pharmacists, surgeons, etc.) are regulated by laws and boards. These health care professionals are required to give you, the patient, advanced notice of any care risks, because health care is not an exact science. It is not reasonable to expect any doctor to foresee all risks and/or complications. Informed Consent information regarding any risks such as: paraplegia, quadriplegia, brain damage, stroke, disc injury, i.e., breaks, fractures, dislocations; drug reactions, death or loss of function of any organ or limb, or disfiguring scars associated with physical care, drugs, surgery and/or treatment is an undesirable result, but it does not necessarily indicate an error in clinical judgment. No guarantee of cure or results has been made to you, the patient in this clinic. Your care may involve the making of recommendations based upon the facts known to the doctor at this time. Chiropractic care does not use drugs or surgery, and does not diagnose internal and/or medical conditions.

For your information the following is furnished to all patients who request and/or accept chiropractic care in this clinic. Again, Chiropractic care does not use drugs or surgery, and does not diagnose internal or medical conditions. This clinic is staffed with graduate Chiropractors who are licensed and recognized by government agencies regulating all the aforementioned healing arts.

Chiropractic is the science that concerns itself with the relationship between the brain, central nervous system, spine, and the function of the body. Any alteration of this relationship can cause the biomechanical and neuro-physiological dynamics of the contiguous spinal and paraspinal structures to be disrupted. This can cause neuronal disturbances in the form of Vertebral Subluxation Complex (VSC) with its physical components, its chemical components, which can then interrupt the body’s inherent recuperative powers.

The practice of chiropractic can include exams and diagnostic testing. In some cases, the utilization of specialized instrumentation, lab tests, radiological exams, nutritional and/or physical therapy, and rehabilitation procedures, etc. There is a special procedure unique to chiropractic: the chiropractic adjustment (chiropractic manipulative therapy – CMT). Adjustments are made by chiropractors to correct and/or reduce and/or stabilize vertebral or extremity subluxation complexes. The Goal of Chiropractic Health Care is to reduce and/or stabilize the nerve interference caused by VSC and its Component Parts. There are over 200 different adjusting techniques, some using specialized equipment. Adjustments are usually performed by hand, but may be performed by hand-guided instruments. A CMT is the application of a quick, specific, precise movement over a very short distance to a specific segmental contact point, usually on a vertebra to reduce or stabilize the VSC and its Component Parts.

You should understand the benefits of chiropractic health care, but you also need to be aware of some of the limited inherent risks. These occur seldom enough to contraindicate care, but should be considered in your informed decision to receive chiropractic care.

All health care procedures have some risks. With CMT’s these risks may include musculoskeletal sprain/strain, disc injuries, dislocations, fractures, neurological deficits, Horners’ Syndrome, Vertebral Artery Syndrome (VAS), Stroke, etc. The chances of this occurring have been generally estimated by experts to be approximately 1 per 250,000 treatments.

Appropriate tests will be performed to identify if you may be susceptible to these risks, and you will be notified in that case. If you have any questions about these issues, please do not hesitate to speak with your Doctor of Chiropractic.

I have read (or have had read to me) the above information. I wish to rely on the Doctor’s judgment during my course of care, based on the facts then known. I have also had the opportunity to ask questions regarding the above information and possible consequences and risks. By signing below, I now agree to have the chiropractic care procedures recommended and performed. I have no questions, and I acknowledge no guarantee of cure has been made to me concerning results, care and treatment.

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 Patient Printed Name Patient Signature Date

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 Parent/Guardian Signature (if minor) Staff/Witness Signature Date