

Informed Consent to Chiropractic Treatment

I hereby request and consent to the performance of chiropractic procedures, including various modes of physical therapy, diagnostic X-rays on me (or the patient name below for whom I am legally responsible) by the doctor of chiropractic who now or in the future may treat me while employed by, working or associated with or serving as back up for Hines Health including those working at the clinic.

The nature of chiropractic treatment is to use his/her hands or mechanical device in order to move your joints. You may feel a click or a pop or you may feel movement of the joint. Various ancillary procedures, such as hot/cool packs, electric muscle stimulation, or cold laser may also be used.

Possible Risks: As with any health care procedure, complications are possible following chiropractic manipulation. Complications include fractures of the bone, muscular strain, ligamentous strain, dislocation of joints or injury to inter vertebral discs, nerves or spinal cord. Cerebrovascular injury or stroke could occur upon severe injury to the arteries of the neck. The ancillary procedure could produce skin irritation, burns, or minor complications. A minority of patients may notice stiffness or soreness after the first few days of treatment.

Probability of risk: The risks of complication due to chiropractic treatment have been described as “rare” about as often as complications are seen from taking a single aspirin tablet. The risk of stroke has been estimated at one in a million to one in twenty million and can be further reduced by careful screening procedures.

Other treatment options:

Over the counter analgesics – the risk of these medications includes irritation to stomach, liver, and kidneys and other side effects in a significant number of cases.

Medical care – typically anti-inflammatory drugs, tranquilizers, and analgesics. Risks of these drugs include a multitude of undesirable side effects and possible patient dependence.

Surgery: in conjunction with medical care surgery adds the risks of adverse reaction to anesthesia, as well as extended convalescent period in a significant number of cases.

Risks of remaining untreated: delay of treatment allows formation of adhesions, scar tissue, and other degenerative changes. These changes can further reduce skeletal mobility, and induce chronic pain cycles. It is quite probable that delay of treatment will complicate the condition and make future rehabilitation increasingly difficult.

I have read or had read to me the above explanation of chiropractic adjustment and related treatment. I have freely decided to undergo the recommended treatment (for myself or minor) and hereby give my full consent to treatment. I understand that I have the right to discuss this with the doctor before treatment.

Print Patient Name

Signature

Date

Print Name of Parent or Guardian

Signature