

Advanced Chiropractic & Sports Care
Alliance Back & Neck Care

Informed Consent / Consent to Treatment

I have been informed of the nature, purpose, scope of care to be provided by the doctor of Advanced Chiropractic & Sports Care, the possible limitations and consequences of that care, and the possibility that the care given by AC&SC may not completely resolve my complaint, dysfunction or condition. I consent to care and recommendations made by the doctor of AC&SC (or my children, if minors) including but not limited to examinations, x-rays, chiropractic adjustments, adjunctive therapies and rehabilitation. I understand that my care will be individualized and therefore may not be comparable with standards or guidelines required by insurance companies, Medicare, professional associations or consensus groups. I understand that my treatment will comply with the standard of care procedures, including those used in this clinic, have risks associated with them. Risks, although rare, associated with chiropractic procedures may include minor aggravation of symptoms, muskoskeletal sprain/strain, neurological deficits, osseous fracture, vertebral artery syndrome, including cerebrovascular accident or death though complication factors. I hereby accept the risks associated with any care by the doctors and staff of AC&SC and release Advanced Chiropractic & Sports Care of any liability for any injury or loss directly related to care I have received at this clinic. In the event of an emergency, I grant the doctors and staff of Advanced Chiropractic & Sports Care permission to provide emergency care and any follow-up necessary, including referral to emergency medical services or other medical facility. I am signing this consent and acceptance of terms after having been fully informed to my satisfaction of the risks and benefits of proceeding with care. I have been informed and fully understand that there are not guarantees of treatment success and consent and elect to the care provided.

Patient Name (please print)

Patient Signature

Date