

B12 Happy Hour PDX

B12HHpdx.com

Today's Date: _____

Name: _____ DOB: _____

Address: _____ City: _____

State: _____ Zip code: _____ Phone: _____

Email: _____ How did you hear about us? _____

Indicate your legal sex: Male / Female / Other

Indicate your preferred gender:

List all allergies; please include environmental and medications:

List all medications, include amount and dosage, you are currently taking:

What are your primary health concerns?

Have you had a B12 injection before? Yes or No

Are you interested in Naturopathic care or Acupuncture? Yes or No

Can we add you to our email newsletter? Yes or No

Thank you for taking the time to fill out this form! Your referrals are always appreciated.

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Informed Consent for Intramuscular Injections

It is important that you read this information carefully and completely. Please read and sign this form before receiving your injection today. Parental consent is required for minors. If someone is translating for you, they must read you the form and you must sign.

You have the right to be informed about potential risks, complications, and possible benefits involved so that you may make the decision whether or not to undergo the procedure. This Informed Consent Form is not meant to scare or alarm you; it is simply an effort to make you better informed so that you may give or withhold consent for the procedure.

Intramuscular (or IM) injection involves the injection of a substance directly into a muscle. IM injections are used for particular forms of nutrients and that are administered in small amounts (2-3cc). Depending on the compounds injected, they may be absorbed fairly quickly or more gradually. Dr. Friedman will administer the IM injection into one of two locations: 1) deltoid muscle (shoulder); or 2) gluteal muscle (upper outer buttock). You will have your choice of injection location.

Proper diagnosis and treatment of a medical condition requires a formal office visit with a medical physician.

Thrombocytopenia (low platelet counts) and coagulopathy (bleeding tendency) are contraindications for intramuscular injections, as they may lead to bruising and/or excessive bleeding. A routine blood test is recommended at least yearly to assess proper organ function.

While no adverse reactions have been known to occur with any of the shot ingredients administered by Dr. Friedman, there are risks and hazards related to the performance of any injection. These risks include pain, erythema (redness), local edema (swelling), bleeding, bruising, injection fibrosis (scar tissue formation), headache, lightheadedness, and allergic reaction. Immediate medical attention may be necessary if you have a significant adverse reaction. Adverse reactions requiring immediate attention include, but are not limited to, fever exceeding 100oF, chills, redness, drainage, or swelling at the injection site. If you experience any of these adverse reactions it the responsibility of the patient to seek medical care or call 911.

There is no guarantee, implied or stated, that the injection(s) administered will improve, reduce or eliminate any medical symptoms or conditions.

I hereby authorize Dr. Friedman to perform intramuscular injection(s) with the nutrient and/or homeopathic injectables of my choice.

Signature _____ Date: ___/___/___

Printed Name _____