



## Northern California Center for Lifestyle Medicine

P: 916-351-8100  
www.ncclm.com

### Consent Form

I \_\_\_\_\_, consent and agree to the Treatment and Supplements recommended for me from Northern California Center for Lifestyle Medicine from the following choices:

- General Diagnostic Procedures – including physical exams, neurological and musculoskeletal assessments, tongue and pulse assessment.
- Lifestyle Counseling, Nutritional and Exercise Prescriptions.
- Herbs/Natural Medicines – prescription of various therapeutic substances including plants, minerals, and animal materials. Substances may be given in the form of tea, pills, powders, essences, essential oils, tinctures (may contain alcohol), plasters, and topical creams.
- Hormone Therapy – hormone prescriptions including bio-identical hormone replacement therapy and thyroid medications (pharmaceutical and natural).
- Dietary Advice and Therapeutic Nutrition – use of foods, diet plans, and nutritional supplements.
- Soft Tissue Therapy and Hydrotherapy – use of therapeutic massage, visceral manipulation, acupressure, trigger point therapy and hydrotherapy (hot and cold water therapies).
- Energy Medicine – use of craniosacral therapy, muscle energy testing and Emotional Freedom Technique (EFT).

Potential benefits: Restoration of health and the body's maximal functional capacity, relief of pain and symptoms of disease, assistance in injury and disease recovery, and prevention of disease or its progress. Results cannot be guaranteed.

Potential risks: fainting, dizziness, discomfort, pain, infection, discoloration, drug/herb interaction side effects, allergic reactions, nausea, loose bowel movements, and abdominal cramping from prescribed herbs or supplements or dietary advice; and soft tissue or bone injury from soft tissue therapy; and aggravation of pre-existing symptoms.

Adjunctive Care: If you experience an adverse reaction to any recommended supplements or treatment, please contact Dr. Garilli immediately and discontinue the substance. If you are experiencing an acute condition, severe adverse reaction, or emergency situation, contact your primary care physician or call 911 immediately.

I understand the Benefits, Risks, Limitations, and Precautions described herein. I will abide by all instructions and precautions in order to achieve optimal results. I take full responsibility for my health during treatments and hold *Northern California Center for Lifestyle Medicine* and Dr. Bianca Garilli, ND free from any legal liability. The maximum damages in case of any valid dispute will be the refund of my treatment fees. I voluntarily consent to the recommended treatment and/or supplements realizing that no guarantees have been given to me by the practitioner regarding the cure or improvement of my condition. I have read the above information and have had all my questions answered to my satisfaction.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_