Agreement for Ketamine Treatment

Clinical studies show that ketamine at subanesthetic dose is safe and effective for treating major depression, bipolar depression and chronic pain. Ketamine is only approved by the FDA for anesthesia and designated by the DEA as a Schedule III controlled substance. For other indications, the use of ketamine is legal but 'off label.' The purpose of this Agreement is to disclose some known clinical facts about ketamine and stipulate ground rules in regard to its 'off-label' use at ACE.

Ketamine is prescribed to me initially as follows (Checked Boxes), which may change during treatment:

Indication	**Route**	**Dosage**	**Frequency**	**Location**
☐ Major depression	☐ Oral	☐ 10-40 mg	☐ Daily or weekly	☐ Home 1 hour before bed time
☐ Bipolar depression	☐ Sublingual	☐ 40-80 mg	☐ _____times a week	☐ Clinic under supervision
☐ Chronic pain	☐ Intramuscular	☐ 80-120 mg	☐ Every ____Week(s)	☐ Driver to home

The ketamine product is supplied by the compound pharmacy of my choosing. My pharmacy is responsible for the quality of the product. I assume the risk of taking the ketamine product dispensed by my pharmacy, and indemnify my physician for prescribing ketamine. I understand that my physician has no association with any pharmacy and gains nothing whatsoever from the dispense of ketamine.

I covenant that I will take the medication as prescribed and store it in a child proof container. I understand my physician may terminate my treatment if the medication is suspected being abused or diverted or I fail to comply with my treatment protocol.

The ketamine treatment program consists of induction and maintenance. Induction takes place in clinic where ketamine is administered under physician supervision in order to establish a safe and effective dosing schedule. After induction, I will be on a maintenance schedule when ketamine can be taken at home. During induction, I shall not drive nor operate machineries after receiving ketamine. I shall arrange transportation at my own expense when leaving the clinic.

I understand that the proposed and perceived benefits from taking compound ketamine are based on medical research, and those claimed benefits are not approved nor endorsed by any professional, state or federal institutions, such as the AMA, APA, ASAM, FDOH, NIH or FDA.

Ketalar - ketamine hydrochloride injection - was approved by the FDA. I am aware of the drug information published by the FDA. The consequences documented from clinical and recreational use of ketamine range from mild dizziness and dissociation to psychiatric crises, hemorrhagic cystitis, vascular catastrophes, or even disability and death. The severity and frequency of the adverse events are generally dose dependent. Although most side effects of ketamine are transient and self resolving, there is insufficient information on the consequences from its long term use. There are evidences of neurotoxicity in animal studies and case reports in human. Commonly reported side effects in clinical and recreational use are the following:

Psychoactive Effects	Cognitive Impairments	Behavioral Effects	Neurological Effects	Urological Effects
▪ dissociation ▪ hallucination ▪ unusual thought ▪ blunt affect ▪ motor retardation ▪ psychosis	▪ mental sluggishness ▪ short term memory ▪ verbal fluency ▪ concentration ▪ vigilance	▪ abuse ▪ tolerance ▪ dependency	▪ dizziness and nausea ▪ sympathetic nervous system ▪ nystagmus, diplopia, dilation ▪ myoclonus and ataxia	▪ dysuria ▪ frequency and urgency ▪ incontinence ▪ hematuria ▪ ulcerative cystitis

For women of child-bearing age, the safety of ketamine during pregnancy and breast feeding has not been established. There are reports of harm to fetus in animal studies. Ketamine is not prescribed to women who are planning for conception, pregnant or breast feeding.

I take full financial responsibility for my ketamine treatment with ACE. My insurance may consider ketamine treatment with ACE experimental and decline payment for services rendered at ACE. I am aware of alternative treatment options, including s-ketamine nasal spray under the trade name of Spravato approved by the FDA for treatment resistant major depression disorder.

By signing this agreement, I attest that I have read and understood this agreement, and my questions have been answered to my satisfaction. I assume all the risk of ketamine treatment and hold no harm to my physician and his staff.

Date of Birth: _____

Print Name	Signature	Date

Witnessed by Physician or ACE staff on behalf of physician:

Print Name	Signature	Date