

Consent to Treat

By signing this form you are agreeing that you
Understand the risk and benefits of treatment and that
You accept all risk of treatment.

I request that services and care be furnished to me by Integracare Clinics and:

1. General Consent for Treatment

I hereby agree to the performance of such procedures and treatments that in the opinion of the attending/consulting physician/provider are deemed necessary.

Any Treatment of a medical condition or for the achievement of healthy aging carries risk. These risks are many but may be grouped as follows:

Financial Risk: You may have a substantial investment in your treatment in terms of time and out-of-pocket expenses. For this expense, you may have no benefit from your health insurance.

Risk of not treating: If you elect not to treat a condition you will be subjected to its natural course. While most illnesses are self-limited, many are not. Some such as heart disease and cancer may be fatal even with proper treatment.

Risk of standard medical care: Every treatment has risk. The goal is to select a treatment that has a risk that, based on your (the patient) assessment of the facts, has a lower risk and better outcome than the natural course of the disease. It has been estimated that only about 20% of medical treatments that doctors do every day have been rigorously studied. For that reason, information is often incomplete and medical decision-making is often an art rather than a science. Even when the facts are clear, the interpretation of their meaning is often unique to each individual. As an example, in the treatment of early-stage prostate cancer (Stage T2) the advantage of surgical treatment confers about 4% advantage in survival. It also confers about a 40% chance of sexual dysfunction. One person will see 4% as a huge advantage in terms of survival and elect to have the surgery. Another may see the 4% advantage as trivial in comparison to the much larger risk of sexual dysfunction and elect not to have surgery. Only an informed patient can make that decision.

Risk of Integrated (Complementary, Alternative) medical care: Often the types of treatment used in integrated medical care are less well studied than standard medical modalities. This is due to the fact that the therapies are generally not patentable medicine, device, or process and so there is no economic incentive to spend the hundreds of millions of dollars to design and conduct large clinical trials. Most of the information concerning integrated medical approaches is anecdotal in nature. Anecdotal means that the belief of the efficacy is based on the experience of the Physician who practices and the patients who receive the therapy and not always on rigorous scientific clinical trials.

Risk of Chiropractic/Physical Therapy/Medical care: Chiropractic and Physical Therapy in care cases have been linked to disfigurement, stroke, death, and an assortment of other adverse reactions.

Infection: With any treatment that breaks the surface of the skin, an infection is possible. Most infections are self-limited or easily treated with antibiotics. We have all seen reports on the news about exotic or resistant infections that do not respond to treatment. While rare, it is possible to become infected with such a bug. This infection could be disfiguring, disabling, or fatal.

Allergic reaction: Any time a foreign substance is introduced into the body, an allergic reaction is possible. These reactions can be mild or severe. In some cases, the reaction can result in shock and death. While most of us are more afraid of a lion than a bee, it turns out that the allergic reaction to bee stings kills more people than do lion attacks.

Idiosyncratic reaction: This is a unique reaction to the procedure, generally related to your unique genetic make-up. It may be due to your unique processing or detoxification of the medication or therapeutics involved. Again, these reactions are generally mild and self-limited. Rarely, they may be more severe. They may result in disfigurement, disability, or death.

Inadequacy of therapeutic intervention: Even the best studied and best thought out therapeutic intervention may not be effective. As an example, the standard treatment of early-stage breast cancer (stage 2b) is mastectomy with adjuvant chemotherapy or lumpectomy with radiation and adjuvant chemotherapy. The addition of chemotherapy to the regimen results in a relative risk reduction for recurrence of about 3%. This leaves the overall recurrence rate at about 50% with the best-known treatments. As with the previous prostate cancer example, one individual may find this advantage compelling and another may find the discomfort of chemotherapy, even with its associated reduced recurrence rate, too great to endure. Once again, only a well-informed patient can decide. In any event, no assurance or guarantee can be made with regard to your personal outcome with any therapeutic intervention. You must accept the responsibility for the choice of therapy you select for your treatment. With less rigorously studied interventions the adequacy of an intervention may be difficult or impossible to assess.

No conversation can be complete about all of the risk and benefits of any treatment. While your doctor will outline the important risks and benefits, it is YOUR responsibility to use the resources provided to learn all you can about your medical care.

2. Release of Information

Health information includes transfer records, medical records, financial and other Information. I authorize Integracare Clinics to release information about me as follows:

- a. To all third-party insurance carriers, health service plans, or health maintenance organizations, or third-party administrators. This release of information is necessary to determine payment of my clinic bill, payment of claims, and/or fraud investigation.
- b. For quality of care review studies.

- c. To health care providers for my continuing patient care and billing purposes.
- d. For purposes of medical or scientific research, I hereby notified that health records may be released for such purposes unless I object. If I object, my health records will not be released. I may revoke this authorization anytime, in writing.
- e. Incidental and limited release of information to independent contractors and technicians in order to repair information systems. Such independent contractors sign a confidentiality agreement prior to access.
- f. I understand the Integracare Clinics shares an electronic medical record system with CentraCare Health Systems and recognize that my information will be shared with their facilities for patient care.

3. Assignment of Insurance Benefits and Guarantee of Account

- a. For services provided by the clinic to me, the undersigned personally guarantee payment to the bill of the clinic incurred as a result of health care services. This includes services, which for any reason are not paid by insurance, government programs, or other third-party sources.
- b. I request payment for authorized Medicare, Medicaid, and/or health insurance benefits for all services furnished to me by Integracare Clinics. I authorize payment directly to the clinic of insurance Medicare, Medicaid benefit, or other funds the patient or I are entitled to receive from other sources for payment of services provided to me.

4. Applicability to Other Providers

I hereby make the above consents/authorizations/assignments/guarantees applicable to other providers furnishing service to me while receiving care from Integracare clinics, and to providers for whom the clinic, by agreement, provides information and services for their billing and patient care purposes, whether by electronic database or otherwise.

Patient Relationship: ____ Self ____ Legal Guardian

My signature assures that I consent to treatment and agree to accept the risk of treatment.

Patient Signature