

## INFORMED CONSENT

PATIENT NAME \_\_\_\_\_

Clinic Name Chiropractic Healthcare Center

Doctor's Name Dr. Lydell D. Nunn

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Phone (717) 755-3899 Fax (717)718-0659

The primary treatment used by doctors of chiropractic is the spinal manipulation, sometimes called spinal adjustment.

♦ **The nature of the chiropractic adjustment.**

I will use my hands or a mechanical instrument upon your body in such a way as to move your joints. That may cause an audible "pop" or "click," much as you have experienced when you "crack" your knuckles. You may feel or sense movement.

♦ **The material risks inherent in chiropractic adjustment.**

As with any healthcare procedure, there are certain complications, which may arise during chiropractic manipulation. Those complications include: fractures, disc injuries, dislocations, muscle strain, Horner's syndrome, diaphragmatic paralysis, cervical myelopathy and costovertebral strains and separations. Some types of manipulation of the neck have been associated with injuries to the arteries in the neck leading to or contributing to serious complications including stroke. Some patients will feel some stiffness and soreness following the first few days of treatment.

♦ **The probability of those risks occurring.**

Fractures are rare occurrences and generally result from some underlying weakness of the bone, which we check for during the taking of your history and during examination and X-ray. Stroke has been the subject of tremendous disagreement within and without the profession with one prominent authority saying that there is at most a one-in-a-million chance of such an outcome. Since even that risk should be avoided if possible, we employ tests in our examination which are designed to identify if you may be susceptible to that kind of injury. The other complications are also generally described as "rare."

♦ **Ancillary treatment.**

In addition to chiropractic adjustments, I intend to use the following treatments:

\_\_\_\_\_

These treatments involve the following additional significant risks:

\_\_\_\_\_

♦ **The availability and nature of other treatment options.**

Other treatment options for your condition include:

- ♦ Self-administered, over-the-counter analgesics and rest
- ♦ Medical care with prescription drugs such as anti-inflammatories, muscle relaxants and painkillers.
- ♦ Hospitalization with traction
- ♦ Surgery

♦ **The material risks inherent in such options and the probability of such risks occurring include:**

- ♦ Overuse of over-the-counter medications produces undesirable side effects. If complete rest is impractical, premature return to work and household chores may aggravate the condition and extend the recovery time. The probability of such complications arising is dependent upon the patient's general health, severity of the patient's discomfort, his pain tolerance and self-discipline in not abusing the medicine. Professional literature describes highly undesirable effects from long term use of over-the-counter medicines.
- ♦ Prescription muscle relaxants and painkillers can produce undesirable side effects and patient dependence. The risk of such complications arising is dependent upon the patient's general health, severity of the patient's discomfort, his pain tolerance, self-discipline in not abusing the medicine and proper professional supervision. Such medications generally entail very significant risks - some with rather high probabilities.
- ♦ Hospitalization in conjunction with other care bears the additional risk of exposure to communicable disease, iatrogenic (doctor induced) mishap and expense. The probability of iatrogenic mishap is remote, expense is certain, exposure to communicable disease is likely with adverse result from such exposure dependent upon unknown variables.
- ♦ The risks inherent in surgery include adverse reaction to anesthesia, iatrogenic (doctor induced) mishap, all those of hospitalization and an extended convalescent period. The probability of those risks occurring varies according to many factors.

♦ **The risks and dangers attendant to remaining untreated.**

Remaining untreated allows the formation of adhesions and reduces mobility which sets up a pain reaction further reducing mobility. Over time, this process may complicate treatment making it more difficult to treat and less effective the longer it is postponed. The probability that non-treatment will complicate a later rehabilitation is very high.

**DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THE ABOVE.**

I have read or have had read to me the above explanation of the chiropractic adjustment and related treatment. I have discussed it with Dr. Lydell D. Nunn and have had my questions answered to my satisfaction. By signing below, I state that I have weighed the risks involved in undergoing treatment and have myself decided that it is in my best interest to undergo the treatment recommended. Having been informed of the risks, I hereby give my consent to that treatment.

DATE \_\_\_\_\_

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

WITNESSES

\_\_\_\_\_  
Signature of Parent or Guardian (if a minor)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

**CONDITION OF PATIENT AT TIME OF CONSENT PROCESS**

Based on my personal observation and direct conversation with the patient, I conclude that throughout the consent process he was:

- Oriented as to time and place
- Coherent and lucid
- Receiving medication but unimpaired
- Able to understand the language used
- Assisted in understanding by use of an interpreter  
(Interpreter's Name \_\_\_\_\_)
- Assisted in consent process by family members

\_\_\_\_\_

Name	Relationship
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- Assisted in consent process by staff members

\_\_\_\_\_

Name

**Patient had the following questions and was supplied with the following answers:  
COMMENTS:**

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I certify that the above accurately describes the consent process in this case.

DATE \_\_\_\_\_

\_\_\_\_\_  
Signature of Doctor

\_\_\_\_\_  
Witness