

Informed Consent Form

Chiropractic treatment is highly conservative, but still has small inherent risks associated with it. Dr. Taylor will use the safest procedures for your condition. The most common side effect is temporary soreness or increased pain following treatment, especially when beginning care. Less frequent is the possibility of bruising, muscle stiffness, rib contusion or fracture, and disk injury. Among the rarest side effects are transient ischemic attacks or strokes (temporary in nature) for those who are highly pre-disposed. A careful history as well as tests to determine your level of risk will always be conducted beforehand.

There are alternatives to chiropractic treatment including taking prescription or non-prescription medication, physical therapy, epidural (steroid) injections, surgery, or any number of holistic treatments.

Dr. Taylor will recommend a treatment program that offers optimal care leading to symptom resolution, strengthening, stabilization, and maintenance therapy. As the patient, you are free to decide how much therapy you wish to receive. Please understand that discontinuing care may lead to a relapse, worsening of symptoms, or the need for more invasive treatment.

I understand the chiropractic treatment program outlined by Dr. Taylor, along with the risks and alternatives. I also understand that the best outcomes are dependent on keeping up with the recommended schedule, following the doctor's instructions, and communicating with the doctor about my case, care and treatment.

Patient Signature _____ Date _____

Doctor's Signature _____ Date _____