



Informed Consent

I understand that His Therapy will maintain my privacy to the highest standards and may use or disclose my personal health information for the purposes of carrying out treatment, obtaining payment, evaluating the quality of services provided and any administrative operations to treatment or payment.

Photographs taken during initial evaluation, progress evaluation and discharge summary will be used for postural comparison purposes and as educational tools, which are not taken at every session or evaluation. By signing below, I consent to the use of these photographs in a professional manner.

I do hereby agree and give my consent for His Therapy to furnish care and treatment that is considered necessary and proper in the diagnosing treating of my physical condition.

I understand that I retain the right to revoke this consent by notifying the practice in writing at any time.

I hereby certify that all the above information is true to the best of my knowledge.

Patient/Parent/Guardian Signature:

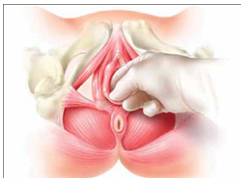
Date:



Informed Consent for Manual Therapy Techniques

The following is being provided to you, in order that you better understand what types of techniques your therapists may use during your treatment.

Myofascial release, scar massage, pelvic floor manual therapy, biofeedback / Estim and dry needling are all interventions that require “hands-on” contact. Therefore, the therapists will ask you to dress appropriately to allow for proper treatment. Below are pictures of some manual therapy techniques being used during the evaluation and treatment. Your therapists will provide you with further education information to better understand the anatomy of the myofascial and pelvic floor as you are being treated.



If you have any questions prior to your first visit, please do not hesitate to call us.

By signing below, I acknowledge that I have read and understand the above, and I consent to receiving these and other manual therapy techniques from my therapist.

Patient/name:

Patient or Guardian Signature:

Date: