Informed Consent for Intravenous (IV) Therapy

Please initial below next to the appropriate statement depending on which classification of IV therapy pertains to you:

IV Wellness Therapy at FoRM Consent:_____ (initial here to agree to the following statement)
I am consenting to receive IV Therapy at FoRM for purposes of supporting ***general wellness***. ***I acknowledge that I am electing to receive IV Wellness formulas for wellness purposes only, and not for the treatment of any medical condition.*** I understand that if I have a medical condition or diagnosis, I must disclose it at the time of scheduling, and I will be required to establish care with an office visit, which may include blood work, before receiving IV therapy at FoRM. I am selecting the IV therapy formula that I believe works best for my goals.

IV Medical Therapy at FoRM Consent: _____ (initial here to agree to the following statement)
I am consenting to receive IV Therapy at FoRM for purposes of addressing symptoms associated with a specific ***medical diagnosis or condition***, and I understand that IV therapy is offered as a supportive therapy and does not replace standard medical treatment for my condition. Prior to receiving IV therapy I understand and agree to an office visit with the IV-performing provider and any blood work (within 1 year) that provider finds to be necessary before starting IV therapy. I understand that IV Medical Therapy at FoRM is physician-directed and includes any of the following IV options: *IV Ozone/MAH, Iron infusions, High Dose Vitamin C (up to 25 grams), NAD+ IV and any Custom Formulation.* **Therapy-specific benefits and risks are described on pages 2–3.**

General Consent:
In addition to full disclosure of my medical history, I have recounted a complete history of all known allergies and have disclosed all current medications and supplements. I will inform staff if I am or may be pregnant or breastfeeding. I understand that this treatment involves inserting a needle and injecting a formula of approved substances into my veins or muscle. I realize that there may be some discomfort at the site of treatment and that it is my responsibility to inform FoRM staff of any burning, pain, or negative reaction I may be experiencing. During IV treatment, it is possible for the injection fluid to leak out of the vein into the surrounding tissue. I understand that although the infiltrated fluid may cause pain, it is usually not dangerous and is typically absorbed by the body. I realize that during and after my treatment I may experience temporary discomfort at the site of treatment. In the rare case of a severe allergic reaction, emergency medical care may be required, and FoRM staff will call 911 if needed.

I understand that there is no implied or stated guarantee of success or effectiveness of any specific treatment. I understand that I am free to withdraw my consent and to discontinue participation in these treatments at any time. I understand that, except in emergencies, I must give 24 hours notice of intent to cancel or reschedule my appointment.

Financial policy regarding IV packages:
I understand that ***IV packages are non-refundable*** once purchased, however they may be transferred to another individual who is an established patient of FoRM. Packages must be pre-paid by the time of service in order to receive any discount. No discount will be offered on IV services rendered individually.

Furthermore, ***I elect to pay out of pocket for all intravenous infusions*** received at FoRM. I will not attempt to bill my insurance for these services, and I understand FoRM Health will not provide superbills for the purpose of billing insurance. By electing to self-pay for these services, I understand that these payments will not go towards satisfying any deductible or out of pocket maximum and I will not submit claims to be billed retroactively.

Advantages of IV Therapy	*Disadvantages of IV Therapy*
- Nutrients go directly into the bloodstream, so the full dose is available to the body (100% bioavailability). - Allows doses higher than can be tolerated by mouth (e.g., magnesium and vitamin C cause digestive upset at high oral doses). - Not affected by digestion, absorption problems, or intestinal disease. - Provides hydration along with nutrients. - Treatment is given and monitored by trained clinical staff. *Alternatives to IV Therapy* - Oral supplementation, lifestyle and dietary changes, or no treatment.	- Pain, bruising, and rarely infection at the IV site. - Inflammation or irritation of the vein used for infusion (phlebitis). - Fluid leaking into surrounding tissue (infiltration), causing swelling or discomfort. - Lightheadedness or fainting, especially during IV placement. - Warmth, flushing, or a drop in blood pressure, most often from magnesium. - Temporary change in taste or smell, or bright-yellow urine (from B vitamins). - Fluid overload or electrolyte imbalance in people with heart or kidney disease. - Severe allergic reaction or anaphylaxis, resulting in cardiac arrest, possibly death. - Benefits are often temporary, and scientific evidence for IV nutrient therapy in healthy individuals is limited.

I have read this form and have had the opportunity to ask questions regarding the content of this form. I authorize the physicians, providers, and clinical staff at FoRM Health, LLC to administer intravenous therapy.

Printed Name:_____ Signature:_____ Date:_____

Informed Consent for Intravenous (IV) Therapy — Medical IV Therapies

Supplement to General IV Consent (page 1). Complete for any IV Medical Therapy received at FoRM.

Please read each section below and **initial next to every therapy you will be receiving**. Your FoRM physician will review your medical history, medications, and any required lab work before your first infusion and will discuss whether each therapy is appropriate for you. **Except for iron infusions used to treat iron deficiency, the therapies below are not FDA-approved for the purposes for which they are offered at FoRM, and the scientific evidence supporting their use is limited or still emerging.** Benefits are not guaranteed and individual results vary.

IV Ozone — Major Autohemotherapy (MAH)

Initial here if receiving: _____

A small volume of your blood is drawn into a sterile container with an anticoagulant (blood thinner), mixed with a measured concentration of medical-grade ozone/oxygen gas, and returned to you through the same IV.

Potential Benefits

- May support oxygen delivery and utilization in tissues
- May help modulate immune and inflammatory responses
- May support circulation, energy, and recovery

Risks & Side Effects

- Bruising, pain, or swelling at the needle site; fainting or lightheadedness during the blood draw
- Reactions to the anticoagulant: bleeding/bruising (heparin) or tingling, cramping, low calcium (citrate)
- Temporary fatigue, headache, or flu-like symptoms after treatment
- Rare: breakdown of red blood cells (hemolysis), blood clots, infection
- Rare but serious: gas embolism (gas bubble entering the bloodstream), which may cause stroke or death

Not recommended / requires physician review if: G6PD deficiency, pregnancy, uncontrolled hyperthyroidism, bleeding or clotting disorders, low platelets, use of blood thinners, recent heart attack or stroke, heparin allergy, or seizure disorder.

Iron Infusion

Initial here if receiving: _____

Iron is given directly into the vein to replenish iron stores when iron deficiency (with or without anemia) is confirmed by lab testing and oral iron has been ineffective, poorly tolerated, or too slow.

Potential Benefits

- Restores iron stores faster than oral supplements
- May improve fatigue, exercise tolerance, and other symptoms of iron deficiency
- Avoids the stomach upset and constipation common with oral iron

Risks & Side Effects

- Headache, nausea, metallic taste, dizziness, flushing, or muscle and joint aches
- Infusion reaction: chest or back tightness, flushing, or changes in blood pressure
- **Leakage of iron into the skin can cause brown staining that may be long-lasting or permanent**
- Low blood phosphate levels (with some iron formulations), which may cause fatigue or weakness
- Rare: severe allergic reaction or anaphylaxis. You will be monitored for 30 minutes after your infusion

Not recommended / requires physician review if: Iron overload or hemochromatosis, prior reaction to IV iron, anemia not caused by iron deficiency, first trimester of pregnancy, active infection, or significant liver disease.

Medical IV Therapies (continued)

NAD+ Infusion

Initial here if receiving: _____

Nicotinamide adenine dinucleotide (NAD+) is a coenzyme involved in cellular energy production and repair. It is infused slowly, typically over 2 to 4 hours; the rate is adjusted to your comfort.

Potential Benefits

- May support cellular energy and mitochondrial function
- May support mental clarity, focus, and mood
- May support recovery from physical and mental stress

Risks & Side Effects

- Rate-related discomfort during infusion: chest pressure or tightness, abdominal cramping, nausea, flushing, headache, muscle tension, or anxiety. These usually resolve quickly when the infusion is slowed or paused
- Fatigue or lightheadedness after treatment
- Vein irritation or discomfort at the IV site
- Long-term safety of repeated high-dose IV NAD+ has not been established

Not recommended / requires physician review if: pregnancy or breastfeeding, active cancer or cancer treatment, significant heart disease, or unstable blood pressure.

High Dose Vitamin C (up to 25 grams)

Initial here if receiving: _____

Vitamin C (ascorbic acid) is infused at doses that produce blood levels far higher than are possible by mouth. **A G6PD blood test and kidney function testing are required before high-dose infusions.**

Potential Benefits

- Reaches blood levels not achievable with oral vitamin C
- May support immune function and antioxidant defenses
- May support energy, tissue repair, and recovery

Risks & Side Effects

- Thirst, dry mouth, increased urination, lightheadedness, or vein irritation
- Low calcium (shakiness, tingling, muscle cramps)
- Kidney stones or kidney injury, especially with kidney disease or a history of stones
- **Falsely high fingerstick blood-sugar readings for several hours after infusion** (important if you are diabetic)
- Severe breakdown of red blood cells (hemolysis) in people with G6PD deficiency

Not recommended / requires physician review if: G6PD deficiency, reduced kidney function, history of oxalate kidney stones, hemochromatosis or iron overload, heart failure or need for fluid restriction, or insulin-dependent diabetes.

I have read the information above for each therapy I have initialed. I understand the potential benefits, risks, and alternatives (including oral supplementation, lifestyle and dietary changes, or no treatment), and I have had the opportunity to ask my FoRM physician questions. I have disclosed all medical conditions, medications, and allergies, and I will tell FoRM staff immediately if I experience any unusual symptoms during or after treatment.

Printed Name:_____ Signature:_____ Date:_____