

# ***GUTIERREZ FAMILY CHIROPRACTIC***

## **AGREEMENT & CONSENT FOR CARE**

WHEN A PATIENT SEEKS CHIROPRACTIC HEALTH CARE, AND WE ACCEPT A PATIENT FOR SUCH CARE, IT IS ESSENTIAL FOR BOTH OF US TO BE WORKING TOWARDS THE SAME GOAL.

- ◆ WE DO NOT OFFER TO DIAGNOSE OR TREAT ANY DISEASE OR CONDITION OTHER THAN SPINAL SUBLUXATIONS. SPINAL SUBLUXATIONS ARE INTERFERENCE TO THE NORMAL FLOW OF MENTAL IMPULSES TRAVELING OVER AND THROUGH THE NERVE SYSTEM THUS INTERFERING WITH THE INNATE HEALING POTENTIAL OF THE BODY.
- ◆ HOWEVER, IF DURING THE COURSE OF A CHIROPRACTIC EXAMINATION WE ENCOUNTER A NON-CHIROPRACTIC OR UNUSUAL FINDING, WE WILL SO ADVISE YOU. IF YOU DESIRE ADVICE, DIAGNOSIS OR TREATMENT FOR THESE FINDINGS, WE WILL RECOMMEND THAT YOU SEEK THE SERVICES OF A HEALTH CARE PROVIDER WHO SPECIALIZES IN THOSE AREAS.
- ◆ THE METHOD OF CORRECTION WILL BE SPECIFIC CHIROPRACTIC SPINAL ADJUSTMENTS, THUS ALLOWING THE BODY TO WORK MORE EFFICIENTLY.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS. ALL QUESTIONS REGARDING THE DOCTORS OBJECTIVE PERTAINING TO MY CARE IN THIS OFFICE HAVE BEEN ANSWERED TO MY COMPLETE SATISFACTION.