

Consent for Treatment

I currently do not have any symptoms from a work injury or other injury in which I am seeking health care for. I am seeking chiropractic wellness care to maintain the health of my spine and to promote wellness within. If I were to have an injury from work or other I agree to inform Dr. TJ Rinaldi prior to any wellness care treatment so that he/she may evaluate and refer me for such.

Wisconsin State law requests that we inform you of the potential risk associated with chiropractic cervical manipulation. According to the medical publication of “Journal of Manipulative Physiological Therapeutics”, the risk of suffering a fatal stroke due to cervical manipulation was placed at 0.0025% (1). This is an obviously staggeringly low statistic.

How does this compare to the number of strokes which occur in the general population of the United States? According to the National Center for Health Statistics, the most current available numbers indicate an annual occurrence rate for stroke was 3,358,000 cases with 143,769 deaths. For a population of 254,281,000, this puts the mortality rate at 0.00057% (2) for strokes in the general public. Chiropractic patients have a less risk of stroke vs. the non-chiropractic patients according to that statistic.

Other rare side effects of chiropractic adjustments are limited to minimal muscular discomfort in very few cases. Typical side effects of chiropractic adjustments include increased range of motion, a feeling of wellbeing and improved spinal and nervous system function.

I have read and understand the above information and I give consent to Dr. TJ Rinaldi to care for me through chiropractic without X-rays as he deems necessary. I also understand that Dr. TJ Rinaldi is responsible for subluxation (mis-alignment of vertebrae or other joint) detection only and that I do not hold Dr. Rinaldi responsible for detecting any other disease state in which I may currently have or that I may develop in the future. Dr. TJ Rinaldi is not my primary physician.

Name _____ Signature _____

Date _____

1. Dabbs V. Lauretti WJ. A risk assessment of cervical manipulation vs. NSAIDS for treatment of neck pain. J Manipulative Physiological Therapeutics 1995: 18:530-6
2. National Center for Health Statistics, 1992,1993

**Thank you for choosing us for your wellness care.
We are looking forward to helping you develop a healthier spine and nervous system!**