



NIECY'S

WELLNESS & MEDICAL SPA

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Vitamin B Complex: The Energizer- Thiamine (1), Riboflavin (2), Pyridoxine (6), Niacinamide (3), Dexpanthenol (5) Injection Consent:

NAME _____ DOB _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE (____) - ____ - ____ EMAIL _____

EMERGENCY CONTACT NAME _____ EMERGENCY CONTACT # _____

REFERRED BY: _____ REASON FOR APPT _____

Medical history? Please list below

Allergies: _____

Vitamin B complex injections are not intended to treat, cure or prevent any illness or condition. All medical conditions should be treated by a physician competent in treating that particular condition. Clearance from medical primary care doctor is required before receiving vitamin B complex injections at Niecy's Wellness and Medical Spa. Niecy's Wellness and Medical Spa assumes no responsibility for customers choosing to treat themselves.

The use of vitamin B complex injections are not intended to substitute for medical care or treatment. Do not stop your medication without first consulting with your doctor or medical professional. Vitamin B complex injections are NOT a substitute for any conventional medication or medical condition. The information contained herein is not intended to cover all possible uses, directions, precautions, warnings, drug interactions, allergic reactions, or



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adverse effects. If you have any questions regarding vitamin B complex injection use, or possible contraindications and or side effects, please consult with your physician or health professional.

Description/Benefits:

B 12 complex helps convert food into energy, while improving cognitive functioning, so you feel sharper and more focused throughout the day. B complex injections are perfect for people with dietary restrictions, for those who have had trouble losing weight, or for anyone experiencing digestion issues. Vitamin B has shown to improve the metabolic process, while also stimulating immune and nervous system function.

Possible side effects and Contraindications:

- Some redness and swelling at the injection site may occur. This should resolve within forty-eight (48) hours.
- In rare cases, Vitamin injections can cause dizziness, heart palpitations, chest pain, muscle cramps, restlessness, diarrhea, peripheral vascular thrombosis, itching, transitory exanthema, urticaria (hives), and feelings of swelling of the whole body.
- I understand that certain herbal products, vitamins, minerals, nutritional supplements, prescription and non-prescription medications may result in side effects when they interact with the B Complex Injection.
- Niacin (B3) can cause flushing and itchiness. Consuming alcohol along with niacin might make the flushing and itching worse. Taking niacin (B3) and using a nicotine patch can increase the possibility of becoming flushed and dizzy.
- Leber's disease is a contraindication for vitamin B complex injection
- People with chronic liver and/or kidney dysfunction should not take frequent B12 injections; therefore, we ask for primary care providers clearance and recommendations on frequency.
- Interactions with drugs: Anticholinergic drugs interact with RIBOFLAVIN (VITAMIN B2), medications used for lowering cholesterol (Statins) interact with NIACIN (VITAMIN B3), chloramphenicol can impede on the red blood cell producing properties of B12.
- Other drugs that decrease or reduce absorption of B12: antibiotics, cobalt irradiation, colchicine, colestipol, H2-blockers, metformin, nicotine, birth control pills, potassium chloride, proton pump inhibitors such as Prevacid, Losec, Aciphex, Pantoloc, and Zidovudine.
- Amiodarone (Cordarone) interacts with PYRIDOXINE (VITAMIN B6)
- At Niecy's Wellness and Medical Spa, we ask that you obtain primary care physician clearance before any treatment

BY SIGNING THIS WAIVER I AGREE THAT:

- I understand the vitamin B complex procedure and I accept the risks, and possible side effects of the treatment.
- I understand that I may experience some redness and swelling at injection site. I understand that rare cases can cause: dizziness, heart palpitations, chest pain, muscle cramps, restlessness, peripheral vascular



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thrombosis, transitory exanthema (rash), itching, urticaria (hives), feeling of swelling of the whole body, instances of bowel intolerance or diarrhea

- I understand that Leber's disease is a contraindication for B complex injection
- I grant Niecy's Wellness and Medical Spa permission to give me a vitamin B complex injection and I do not hold them responsible for any adverse health reactions.
- I am aware that the results are not guaranteed and I may require more treatments to achieve my desired results.
- I will make Niecy's Wellness and Medical Spa aware of any changes to my medical history before every subsequent treatment.
- I acknowledge that this consent will cover this treatment as well as subsequent treatments I may have.
- At Niecy's Wellness and Medical Spa, we ask that you obtain primary care physician clearance before any treatment

LIMITATION OF LIABILITY: You agree, acknowledge, and voluntarily assume the risk of injury, accident or death which may arise from the use of a hot tub/sauna. I and any of my heirs, executors, representatives, or assigns hereby release all claims or liabilities for personal injury or property damages of any kind sustained while on the premises, during the use of B-Complex Injections and from any advice provided by an employee, independent contractor, or any representative. I agree that this disclaimer and consent is in effect for all hot tub/sauna sessions and will not expire unless specifically requested by either party. I understand that if any new health conditions and/or medication changes are made, I will consult with my primary care doctor to be cleared again before further use. I further understand that the employees and practitioners at Niecy's Wellness and Medical Spa are not medical doctors and are not attempting to portray or conduct the activities of a medical doctor. I have carefully read the above safety instructions for using the B-Complex Injections. I fully understand them and fully agree to comply with instructions. I will consult with the staff of Niecy's Wellness and Medical Spa if I have further questions.

NAME: _____

DATE: _____

SIGNATURE: _____

DATE: _____

If under the age of 18- PARENT GUARDIAN

SIGNATURE: _____

DATE: _____

PRACTITIONER NAME: _____

DATE: _____



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SIGNATURE: _____

DATE: _____

MEDICAL DIRECTOR NAME: _____

DATE: _____

SIGNATURE: _____

DATE: _____