



NIECY'S

WELLNESS & MEDICAL SPA

128 Princeton Rd. Ste. #3
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(423)410-0072
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Vitamin C Injection Consent Form:

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 C 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 C 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 C injections is not intended to substitute for medical care or treatment. Do not stop your medication without first consulting with your doctor or medical professional. Vitamin C 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 adverse effects. If you have any questions regarding vitamin C injection use, or possible contraindications and or side effects, please consult with your physician or health professional.



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Description/Benefits:

Vitamin C helps maintain good health and has been shown to be beneficial in acting as an anti-oxidant. It has been reported to help treat conditions such as the common cold, cataracts, low iron status, ulcerative colitis, and heart disease. It shows promise in fighting cancer although this has not been medically proven at this time. Boosts your immune system, keeps your cells healthy, and speeds up the healing process.

Alternatives to Vitamin C injections are Oral Vitamins, Lozenges, and fruits and juices.

Possible side effects and Contraindications:

I understand I should not get this treatment if I am diabetic, on a sodium restricted diet, or taking coumadin, unless I get an acceptable release from my primary care physician. I cannot have this treatment if I am currently pregnant or nursing. If I have ever shown hypersensitivity to any component of this injection, I should not take it.

Vitamin C Injections side effects include but are not limited to:

- Mild tenderness, redness, swelling around injection site
- Temporary dizziness
- A feeling of pain and headaches
- With rare instances of bowel intolerance or diarrhea.

If any of these side effects become severe or troublesome I will contact my physician immediately

BY SIGNING THIS WAIVER I AGREE THAT:

- I understand the vitamin C procedure and I accept the risks, and possible side effects of the treatment.
- I understand that I may experience some redness, swelling, temporary dizziness, a feeling of pain and headaches, rare instances of bowel intolerance or diarrhea, tenderness/redness/swelling around the injection site that may last a few days.
- I grant Niecy's Wellness and Medical Spa permission to give me a vitamin C 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



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LIMITATION OF LIABILITY: You agree, acknowledge, and voluntarily assume the risk of injury, accident or death which may arise from the use of Vitamin C Injections. 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 Vitamin C 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 vitamin C injections 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 Vitamin C 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: _____

SIGNATURE: _____

DATE: _____

MEDICAL DIRECTOR NAME: _____

DATE: _____

SIGNATURE: _____

DATE: _____