

Hormone Replacement Therapy Consent

I, the undersigned, authorize and give my Informed Consent for the administration of hormone replacement therapy with recommended bio-identical hormones.

Expected benefits of hormone replacement therapy:

- Possible benefits include control of symptoms associated with declining hormone levels, which may reduce, or control symptoms and dysfunction associated with declining hormone levels, through hormonal replacement including bone protection, improved libido and sexual function, increased muscle mass and strength, improved sense of well-being, decreased mood swings, anxiety, irritability, and increased mental clarity.
- I have been fully informed, and I am satisfied with my understanding, that this treatment may be viewed by the medical community as new, controversial, and unnecessary by the Food and Drug Administration.
- I understand that my healthcare provider cannot guarantee any health benefits or that there will be no harm from the use of hormone replacement therapy.

Alternatives to hormone replacement therapy:

- I understand the reasonable alternatives to hormone replacement therapy, which include:
 - Leaving the hormone levels as they are and doing nothing. Risks may include but are not limited to: experiencing symptoms of hormone deficiency, and increased risk for aging-related diseases or dysfunction resulting from declining hormone levels. This alternative may result in the need to treat diseases or dysfunction associated with declining hormone levels as they appear clinically.
 - Treating the symptoms of declining hormone levels as they develop with non-hormonal therapies. Risks may include, but are not limited to: increased risk for aging-related diseases resulting from declining hormone levels
 - Certain supplements that might improve natural production of hormones.

Risks and side effects of hormone replacement therapy:

Some of the following risks/adverse reactions are derived from the official Food and Drug Administration "FDA" labeling requirements for these drugs, for therapeutic drug levels in the blood stream. My healthcare provider may prescribe these medications at dosages designed to achieve physiologic levels of hormones generally associated with those of a 20-35-year-old person and would be within the "normal" or "average" blood concentrations of that age group.

General:

I understand that the injectable hormone procedure may cause slight discomfort and bruising at the injection site. In addition, there is a small risk of infection; and I need to report any redness, swelling, pain, bleeding, or elevated temperature to my physician if it occurs.

I understand that there are risks (both known and unknown) to any medical procedure, treatment and therapy, and that it is not possible to guarantee or give assurance of a successful result. I acknowledge and accept these known and unknown general risks.

I understand that expected effects may vary and there is a possibility that I might experience lack of effect. A significant hormonal transition will occur in the first four weeks. Therefore, certain changes might occur that can be bothersome. Hormone receptors that have not been stimulated by adequate amounts of hormones can be extremely sensitive to normal doses of testosterone and/or estrogen, therefore, there is an adjustment period for some people, especially those who were deficient in hormones prior to starting replacement therapy.

Initials: _____

Testosterone replacement risks and side effects may include but are not limited to:

- The most common immediate side effects (occurring in approximately no more than 6% of users) include, but are not limited to: acne, hair loss, procedure site reaction, headache, hypertension (high blood pressure), abnormal liver function tests, increased body hair growth, and non-cancerous prostate disorder. Other side effects may include greasy hair and skin, a strong body odor, and aggressiveness.
- Acne typically lasts a short time and can be handled with good face washing, astringents, toner, specific supplements or medications.
- Fluid entrapment in the muscle from testosterone stimulating the muscle to grow. This may result in a weight change of two to five pounds. This is only temporary and may last two to three weeks and it happens frequently with the first insertion and especially in a hot and humid weather conditions.
- Swelling of the hands and feet is common during hot and humid weather conditions; this can be treated by drinking water, reducing salt intake, or using a mild diuretic. This is only temporary.
- Stimulation of benign and malignant prostate tumor growth. Testosterone replacement is contraindicated in patients with known prostate cancer.
- Increased risk for the development of prostate enlargement when replacing testosterone.
- The concurrent use of testosterone with corticosteroids may enhance edema (fluid retention) formation.
- Increased in the red blood cells, determined by periodic bloodwork. It is not a common occurrence and generally poses no health risk; it can be corrected by donating blood or with a therapeutic phlebotomy.
- Increased blood viscosity, therefore increased risk for developing a blood clot; you should ensure adequate water intake and take an anti-platelet aggregator such as aspirin.
- Male pattern baldness, gynecomastia (breast enlargement), diminished sperm production and a reduction in the size of the testicles may develop in men.
- Testosterone replacement may reduce insulin requirements in insulin dependent diabetics.
- Edema may be a complication with testosterone replacement in patients with pre-existing cardiac, renal, or hepatic disease.
- Clitoral enlargement and voice change.

Estrogen replacement side effects may include but are not limited

Breast tenderness and nipple sensitivity are not uncommon with hormone replacement. This is caused by the increased blood supply to the breasts that estrogen causes. The breast tenderness is self- limited and usually resolves within the first month.

Uterine spotting or bleeding may occur in the first two months after starting an estrogen replacement therapy, especially if progesterone is not taken properly; i.e. Missing doses or is not at high enough dose. Physician's office needs to be notified of anything more than occasional light spotting. The bleeding is not ordinarily an indication of a significant uterine problem. More than likely, the uterus may be releasing tissue that needs to be eliminated; such as tissue already present in the uterus prior to starting treatment.

Mood swings and irritability can occur. It is usually seen in patients who are very deficient in hormones prior to receiving treatment. This will typically disappear when enough hormones are in the patient 's system and the receptors adjust. The dosage of hormones may be lowered with the next follow up visit/lab review.

Increased body fat, depression, headaches, impaired glucose tolerance, and aggravation of migraines. Some research suggests there might be increased risk of heart attacks, blood clot formation, gallstones, uterine cancer (if progesterone is not administered with concurrently) and fibroid tumors.

Estrogen replacement is not recommended in women with a history of the following conditions: breast or uterine cancer, phlebitis and blood clots, gall bladder disease, uterine fibroma, and liver disease.

Patient's Name: _____

Signature: _____

Witness: _____ Date: _____