

## **New Energy Nutrition**

Christine Mastrangelo RD, LDN  
www.newenergynutrition.com  
781.248.8238

### **General Release for Services Rendered**

New Energy Nutrition maintains that all client / patient information (medical/personal/billing) will be kept strictly confidential. (Please refer to confidentiality policy.)

I agree to permit the Registered Dietitian named above to communicate with my physician and to review my medical records. This can include but is not limited to: diagnoses, medical/surgical history, laboratory values (from blood work), diagnostic tests, a list of my current prescribed medications, and a copy of the note from the last physician visit. I understand that a comprehensive history is required for the Registered Dietitian named above to provide a complete nutrition assessment and to make appropriate recommendations. I agree to keep the Registered Dietitian named above informed of any changes in my medical condition. I give permission for New Energy Nutrition to contact necessary people (physician / family) if they feel a life-threatening situation may be present.

I understand that the Registered Dietitian named above is not responsible for refunding payment should my insurance company deny my request for payment. I understand my financial responsibilities for entering into a consultation agreement with New Energy Nutrition.

The Registered Dietitian named above is not responsible if I withhold medical or other pertinent information and is not liable for any negative consequences, which may result due to the withholding of information. The Registered Dietitian named above is not responsible for negative consequences that result from recommendations that I do not follow completely and correctly.

I understand that a Registered Dietitian is not a physician and is not trained to provide diagnoses.

I understand that I must be under the care of a primary medical doctor to receive services.

I understand that the Registered Dietitian named above makes no claims or warranties regarding the results I obtain under her direction.

**Any questions or concerns should be directed to:**  
**Christine Mastrangelo RD LDN**  
**New Energy Nutrition**  
**781.248.8238**

**I have read and understand the above information.**

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Signature of client / Legal Guardian

Date

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PRINTED NAME / Legal Guardian