**Orientation & Discharge Video Form**

By signing below, I agree that I have watched the Orientation and Discharge Video and I understand that the Qest4 is not diagnostic testing but for the purpose of identifying and balancing unhealthy energy patterns.  I also understand that if a frequency shows up in the testing procedure that the practitioner is not saying that this is present in the body but simply that the frequency is needed for balancing the body energetically.

I further understand that this does not take the place of advice given by my primary care physician and that if I have any questions regarding the suggested schedule and the interaction of prescribed drugs that I will consult my physician.  I also understand that the detox process can create a healing crisis and it is possible I will feel worse before I feel better.  This is considered a normal part or energy balancing.

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 Client’s Signature

