PharmX healthOne.com
Integrated Medical Clinic

PATIENT-READY TREATMENT-SPECIFIC FORM

Supplement, Nutraceutical, and Wellness Product Acknowledgment

Treatment-specific/product acknowledgment - complete when supplements or wellness products are recommended or purchased

Patient Name (Elation auto-populated or print):		**Date of Birth:**	
Preferred Phone:		**Date of Form:**	

Purpose and Scope

This form is treatment-specific. It applies only if the patient is being evaluated for, prescribed, receiving, purchasing, or continuing the service, product, medication, procedure, device-based treatment, or care category described in this form. This form does not replace the New Patient Registration Form, General Consent for Evaluation and Treatment, HIPAA Notice of Privacy Practices, Telehealth Consent, Cash-Pay Financial Responsibility Agreement, Good Faith Estimate/Self-Pay Notice, Patient Portal Agreement, or any other PHO policy acknowledged by the patient.

PHO may discuss or recommend supplements, nutraceuticals, vitamins, minerals, herbs, wellness products, or protocols as part of functional medicine, preventive care, weight management, hormone-related care, wellness support, or treatment planning. These products may be sold by PHO or obtained from third parties. Recommendations are individualized but do not guarantee results.

FDA and Medical Disclaimer

Many supplements and nutraceuticals are not FDA-approved to diagnose, treat, cure, or prevent disease. Product statements may not have been evaluated by the FDA unless specifically stated on the product labeling. Supplements can have side effects, interact with medications, affect lab results, affect surgery/anesthesia risk, or be inappropriate for pregnancy, breastfeeding, kidney disease, liver disease, bleeding disorders, autoimmune disease, cancer history, or other conditions.

Patient Responsibility

The patient must disclose all prescription medications, over-the-counter drugs, supplements, allergies, medical conditions, pregnancy/breastfeeding status, and adverse reactions. The patient should follow label instructions and PHO directions, not exceed recommended doses, and stop/use caution if adverse symptoms occur. Patients should tell surgeons, anesthesiologists, primary care providers, and specialists about supplements.

Returns and Refunds

Because of safety, storage, tampering, contamination, patient-specific, and product-integrity concerns, opened, damaged, used, expired, specially ordered, customized, shipped, temperature-sensitive, or non-resalable products are final and non-refundable. Unopened nutraceuticals may be returnable only if PHO's written policy allows return, the product is undamaged, in the same condition as purchased, within the allowed timeframe, and not otherwise restricted.

No Guarantee

PHO does not guarantee symptom improvement, lab improvement, weight loss, hormone balance, increased energy, improved immunity, disease prevention, or any other outcome from supplements or wellness products.

Patient Acknowledgments

[ ] I understand supplements/nutraceuticals may not be FDA-approved to diagnose, treat, cure, or prevent disease.

[ ] I understand supplements may have side effects, interactions, and contraindications.

[ ] I agree to disclose all medications, supplements, allergies, and health conditions.

[ ] I understand product returns/refunds are limited by PHO policy and many products are final/non-refundable.

[ ] I understand no supplement or wellness outcome is guaranteed.

Patient Signature:		**Date:**	