

Form and Fitness Physical Therapy

13606 Xavier Lane, Unit C
Broomfield, CO 80210
(303) 404-9494

Informed Consent

Potential Risks of Physical Therapy Treatment include but are not limited to: increased pain, tissue strain or sprain and skin irritation/burns. More remote risks include: nerve damage, heart attack, stroke, and broken bones. There is also the risk of treatment failure, relapse and the need for further treatment.

Potential Risks of Not Receiving Physical Therapy Treatment include but are not limited to: further loss of motion/function, increased pain and other symptoms, decreased strength and arthritis.

Expected Benefits of Physical Therapy Treatment include but are not limited to: decreased pain and other symptoms, improved function and education for self care.

Due to the nature of “hands on” evaluation and treatment techniques used in Physical Therapy, physical contact with the injured body part and those parts related to the injury is required.

I have read the above and all of my questions have been addressed. I acknowledge that no guarantees of outcome can be given. By signing below, I, _____ hereby authorize Brian Forman PT, DPT, MS, ATC, Rebecca Fetchen MSPT, or any of their agents to provide physical therapy evaluation and treatment to me.

Signed: _____

Date: _____