



## The Healthology Company

### Informed Consent for Bio-electrical Impedance Measurement

Procedure: Bio-electrical Impedance Measurement (BIM) is a simple, non-invasive procedure designed to measure electrical impedance in the body. A metal stylus is touched to the skin to measure electrical impedance at 58 key points on the hands and feet. An analysis of the body's major organs and systems is completed through this process. A software program plots assessment results on a chart.

Based upon the results of your BIM assessment, the technician will recommend certain nutraceutical and homeopathic products to you for the support of the health of one or more organs and systems of your body. The technician may also suggest lifestyle changes for the benefit of your health. Your homeopathic products you may use, and lifestyle changes you may make, may or may not result in the improvement of your health.

Because BIM equipment is registered with the U.S. Food and Drug Administration (FDA) as a Class II Medical Device, it is performed by or under the direction of a licensed healthcare practitioner. However, BIM is not used to prevent diagnose, treat, cure, or mitigate the symptoms of any disease. Rather, it is used to support health. Therefore, it is not a substitute for medical care. You are advised to continue to visit your medical doctor for treatment of any medical conditions that you may have.

All nutraceutical and homeopathic products recommended by your technician under the direction of the provider, for your use are safe if taken as directed. However, if you experience any adverse reaction, report them to your technician immediately. Also, please inform your technician if you are under the care of a medical professional for any health concerns (i.e. Diabetes, high blood pressure, heart condition, etc.).

I have read and understand the above information regarding BIM and hereby give consent for testing with this equipment.

Print Name of Recipient of BIM Service: \_\_\_\_\_

If applicable, Print Name of Legal Guardian: \_\_\_\_\_

Signature of Recipient or Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_