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EVIDENCE BASED, CLINICALLY INTUITIVE CE

Documenting Informed Consent

James Demetrious, DC, DABCO
Diplomate, American Board of Chiropractic Orthopedists

www.PostGradDC.com



1

James Demetrious, DC, DABCO

Clinician

- DC - NYCC
- Diplomate, American Board of Chiropractic Orthopedists
- Fellow, International Academy of Neuromusculoskeletal Medicine

Educator

- Post-graduate educator since 2000
- NCMIC Speakers' Bureau for >10 years
- Northeast College of Health Sciences
- CEO - PostGradDC.com

Honors

- Academy of Chiropractic Orthopedists Distinguished Service and Fellow Awards
- American College of Chiropractic Orthopedists Outstanding Achievement Award

Publications



- Over 31 Peer-Reviewed chiropractic journal articles.
- Many Contributions to NCMIC Examiner and Chiropractical Podcast

Editorial

- Editorial Reviewer for journals Spine, Annals of Internal Medicine, and Clinical Anatomy
- Former Managing Editor of Journal of Chiropractic Orthopedists

Community


- Lower Cape Fear Hospice, Board Member
- Founder, Past-President Wilmington Autism Society

2

Disclosures

- Dr. Demetrious owns and operates **PostGradDC.com**, a company that offers advanced online post-graduate continuing education.
- Dr. Demetrious is a member of the **NCMIC** Speakers' Bureau and teaches advanced continuing education course work throughout the United States.
- Text and graphics on the following slides are presented for educational purposes. Meticulous references and attribution have been made to respective authors and copyright holders.
- Opinions expressed in this lecture are solely reflective of the instructor's experience/interpretation of scientific tenets.




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3


3

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- The views and opinions expressed in this presentation are solely those of the author.
- Dr. Demetrious does not set practice standards.
- As research is published, conclusions change. Research offered in this presentation does not represent practice standards.
- We offer this only to educate and inform.



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4

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To receive the discount, the DC can email or fax a copy of their CE form to NCMIC.



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5

5

Informed Consent - Syllabus

- Purpose;
- Definitions;
- Why is it so important?;
- The Standard of Care;
- IC is a process:
 - A compliance manual;
 - Intake forms;
 - Ongoing discussion;
 - Office notifications:
 - Countertop;
 - Web page content.
- How to implement.



6

Purpose...

“Informed consent is not just the signing of a form. Informed consent is about a thorough process of communication between patient and provider.”

Aaron Fink, MD
Emory University School of Medicine

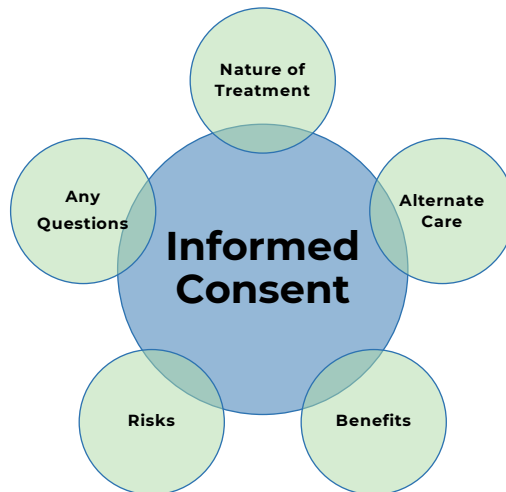


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7

Informed Consent



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8

Definition - Informed Consent



“Stated simply, informed consent in medical care is a process of communication between a clinician and a patient that results in the patient’s authorization or agreement to undergo a specific medical intervention (see sidebar box for The Joint Commission’s glossary definition).”

Informed consent: Agreement or permission accompanied by full notice about the care, treatment, or service that is the subject of the consent. A patient must be apprised of the nature, risks, and alternatives of a medical procedure or treatment before the physician or other health care professional begins any such course. After receiving this information, the patient then either consents to or refuses such a procedure or treatment.

Source: The Joint Commission. 2016. Comprehensive Accreditation Manual glossary.



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CMAJ

REVIEW

Informed consent for clinical treatment

Daniel E. Hall MD MDiv, Allan V. Prochazka MD MSc, Aaron S. Fink MD

KEY POINTS

- Informed consent means different things in different contexts, is variably practised and rarely achieves the theoretical ideal.
- Simple consent entails that a patient (or surrogate) with decision-making capacity freely authorizes a treatment plan aimed at a mutually acknowledged treatment goal.
- The authorization is “informed” when the physician discloses and the patient understands the diagnosis, the relevant options for treatment (including no treatment) and any respective risks and benefits.
- The informed consent process should be documented thoroughly, using an electronic medical record, procedure-specific consent forms, patient education materials and other options whenever possible.

CMAJ, March 20, 2012, 184(5)

533



CMAJ

REVIEW

Informed consent for clinical treatment

Daniel E. Hall MD MDiv, Allan V. Prochazka MD MSc, Aaron S. Fink MD

Daniel Hall

Figure 1: Venn diagram showing the multiple overlapping purposes of informed consent.

11

What is the Standard of Care?

Table 2. Historical development of the Standard of Care

Initial Definition

Based on custom

That which is typically done is what is considered standard

The 20th Century Definition (*Helling v. Carey; The TJ Hooper*)

That which is customarily done plus anything that seems reasonable even if not typically done

The Modern Definition (*Hall v. Hilburn; McCourt v. Abernathy; Johnston v. St. Francis Medical Center*)

That which a minimally competent physician in the same field would do under similar circumstances

The Standard of Care: Legal History and Definitions: the Bad and Good News
[West J Emerg Med. 2011 Feb; 12\(1\): 109-112.](#)

12

What is the Standard of Care?

Chief Justice C.J. Robertson stated:

- “Medical malpractice is a legal fault by a physician or surgeon. It arises from the failure of a physician to provide the quality of care required by law. When a physician undertakes to treat a patient, he takes on an obligation enforceable at law to use minimally sound medical judgment and render minimally competent care in the course of services he provides. A physician does not guarantee recovery... A competent physician is not liable per se for a mere error of judgment, mistaken diagnosis or the occurrence of an undesirable result.” 11

11. Hall v. Hilburn, 466 So. 2d 856 (Miss. 1985).

The Standard of Care: Legal History and Definitions: the Bad and Good News
[West J Emerg Med. 2011 Feb; 12\(1\): 109-112.](#)



13

What is the Standard of Care?



HOME ABOUT CE COURSES ABOUT DR. NICCHI BROWSE CE COURSES CE TRANSCRIPTS

CALENDAR OF CE COURSES

Safety of Chiropractic Care and Informed Consent: The Penny Must Drop

Tuition: \$20.00

\$20.00

Course Instructors: Anthony L. Rosner, PhD, LL.D.[Hon], LLC
 Credit Hours: 1

Course Categories: General Topics, Ethics/Documentation Topics, NCMIC Courses, NJ LCA CE



14

What is the Standard of Care?

Northwestern Health Sciences University **CHIROPRACTIC INFORMED CONSENT**

I hereby give my consent to the performance of diagnostic tests and procedures and chiropractic treatment or management of my condition(s).

I understand that the treatment I receive at this clinic may be performed by advanced chiropractic interns under the supervision of a Licensed Doctor of Chiropractic. I also understand that this is a working clinic and that incident observations may be present during treatment.

Chiropractic treatment or management of conditions almost always includes the chiropractic adjustment, a specific type of joint manipulation. Like most health care procedures, the chiropractic adjustment carries with it some risks. Unlike many such procedures, the serious risks associated with the chiropractic adjustment are extremely rare. **Following are the known risks:**

Temporary increase in discomfort or pain. It is not uncommon for patients to experience temporary worsens or increased symptoms or pain after the first few treatments.

Distraction, nausea, dizziness. These symptoms are relatively rare. It is important to notify the chiropractor if you experience these symptoms during or after your care.

Exacerbation. When patients have underlying conditions that weaken bones, like osteoporosis, they may be susceptible to fractures. It is important to notify your chiropractor if you have been diagnosed with a bone weakening disease or condition. If your chiropractor detects any such conditions while you are under care, you will be informed and your treatment plan will be modified to minimize risk of fracture.

Disc herniation or extrusion. Spinal disc conditions like bulges or herniations may worsen even with chiropractic care. It is important to notify your chiropractor if symptoms change or worsen.

Stroke. A certain extremely rare type of stroke has been associated with chiropractic care. Although there is an association between this type of stroke and chiropractic visits, there is also an association between this type of stroke and primary care medical visits. According to the most recent research, there is no evidence of excess risk of stroke associated with chiropractic care. The increased occurrence of this type of stroke associated with both chiropractic and medical visits is likely explained by patients with such pain and headache consulting both doctors of chiropractic and primary care medical doctors before or during their stroke.

Other risks associated with chiropractic treatment include rare burns from physiotherapy devices that produce heat.

Reactions. Treatment assisted soft tissue manipulation may result in temporary worsens or bruising.

I understand that the practice of chiropractic, like the practice of all healing arts, is not an exact science, and I acknowledge that my outcome can be given as to the results or outcomes of my care.

PATIENT PLEASE REVIEW, PRINT & SIGN NAME

I have read or had read to me this informed consent document. I have discussed or been given the opportunity to discuss any questions or concerns with my chiropractor and have had these answered by my satisfaction prior to my signing this informed consent document. I have made my decision voluntarily and freely.

PATIENT'S NAME (Print) _____ DATE _____ DATE OF BIRTH _____
(PATIENT | GUARDIAN SIGNATURE) _____ (DATE) (TRANSLATOR | INTERPRETER SIGNATURE) _____ (DATE)

(PATIENT SIGNATURE) _____ (TRANSLATOR SIGNATURE) _____
I read on my personal observation and the patient's history, I certify that the patient has read and understood the informed consent portion the patient may be given as to the results or outcomes of my care.
I am an interpreter (Date) _____ I am a translator (Date) _____ I am a patient's relative (Date) _____
I am a doctor of chiropractic (Date) _____ I am a doctor of medicine (Date) _____ I am a nurse practitioner (Date) _____
I am a physician assistant (Date) _____ I am a physical therapist (Date) _____ I am a chiropractor (Date) _____
(D.C. SIGNATURE) _____ (DATE) _____

Northwestern Health Sciences University • 2501 W. 84th St. • Bloomington, MN 55431 • 952.886.7388




What is the Standard of Care?

Guidelines for the Practice of Chiropractic in North Carolina

III. Informed Consent (added July 2008)


- A. A chiropractic physician is legally and ethically obligated to obtain informed consent from his patient prior to the start of treatment. Consent cannot be considered informed unless, at a minimum, the physician orally explains the risks associated with the proposed course of treatment, answers any questions the patient may have, and obtains the patient's permission to treat.
- B. The physician shall note in the patient's clinical record the date of the informed consent consultation, the matters discussed, and the authorization to treat given by the patient. A standardized form may be used only as a written acknowledgment by the patient that the consultation occurred and that consent was given. A form cannot replace the face-to-face discussion between physician and patient contemplated by this guideline.
- C. If the patient is a minor or an incompetent adult, the informed consent consultation shall include the patient's parent or legal guardian.





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SEPTEMBER 2022 ENFORCEMENT ACTIONS

ACCUSATIONS FILED

Name and City	License No.	Date Filed	Alleged Violation(s)
Park City, UT		9/23/2022	<ul style="list-style-type: none"> • CCR 317(h) – Unprofessional Conduct: Acts Involving Dishonesty • CCR 317(q) – Unprofessional Conduct: Fraud or Misrepresentation • CCR 317(i) – Unprofessional Conduct: Making or Signing Documents with False Statements • CCR 317(b) – Unprofessional Conduct: Repeated Acts of Negligence • CCR 317(d) – Unprofessional Conduct: Excessive Treatment or Diagnostic Procedures • CCR 317(e) – Unprofessional Conduct: Conduct That Endangers or is Likely to Endanger the Public • CCR 318(b) – Accountable Billings • CCR 319.1 – Lack of Informed Consent • CCR 318 – Failure to Maintain Complete Chiropractic Patient Records


DISCIPLINARY ACTIONS

Name and City	License No.	Action	Effective Date	Violation(s)
Bend, OR		Public Reapproval	9/8/2022	<ul style="list-style-type: none"> • CCR 317(m), 318(a)(7), and 319.1 – Failure to Maintain Signed Written Informed Consent



17

A Big Problem



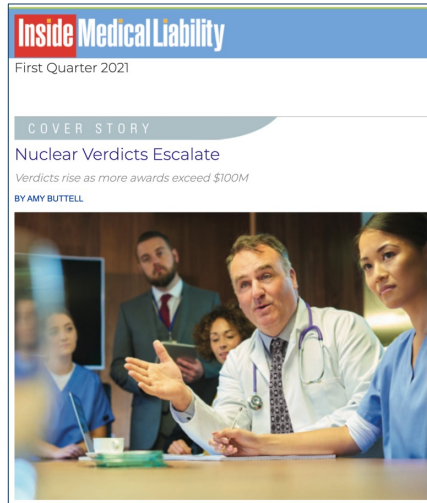
A BIG PROBLEM

Increasing judgments against insured.

18

Nuclear Verdicts



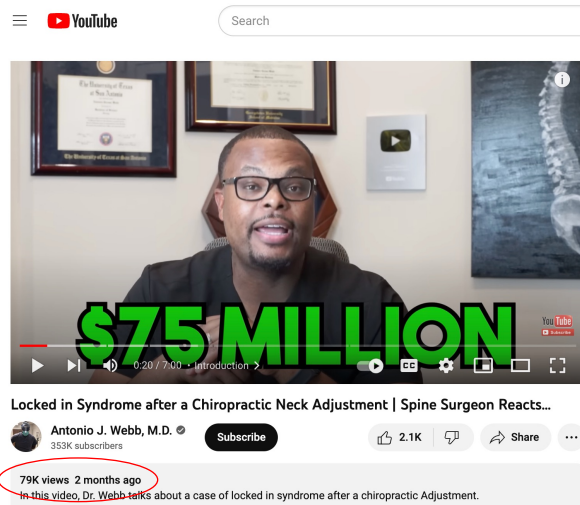
- Data from the MPL Association Data Sharing Project shows that the **number of awards of more than \$1 million has gradually increased over time, reaching 12% of verdicts** between 2016 and 2018.
- Additional data shows that the **50 largest verdicts remained within a band of \$15 to \$20 million** between 2001 and 2015.¹
- However, beginning in 2016, the **average verdict severity rose by 50% between 2016 and 2019 to an average of \$23 million.**²

"An Overview of Medical Malpractice Verdict Awards,"
2020 Aon/ASHRM Hospital and Physician Professional
Liability Benchmark Analysis, 2020.



19

Nuclear Verdicts...Harmful Viral Responses





20

Malpractice Litigation

48 Chiropractic Malpractice Cases
45 SMT Cases


<p>Defense Victory</p> <p>70.8%</p> <p>Settlements - Mean Payments \$596,667</p>	<p>Plaintiff Victory</p> <p>20.8%</p> <p>Mean Payments \$658,487</p>
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Malpractice Litigation Involving Chiropractic Spinal Manipulation
World Neurosurgery, Volume 149, May 2021, Pages e108-e115

21



Bad Press that is Going Viral



Rebecca Barlow won a \$1.1 million jury verdict for injuries caused by routine chiropractic adjustments. Jan. 28, 2023

By a 9-3 vote, the jury awarded her **\$1,030,900**, including **\$380,000** in medical expenses and **\$750,000** for pain and suffering.

- **Error of Commission?:**
 - Treatment failure:
 - Excessive force?
 - Incorrect or poor technique?
- **Error of Omission?**
 - Failure to diagnose?
 - Failure to identify symptoms or signs?
 - Failure to identify risk factors including pre-existing genetic or acquired connective tissue disorders?
 - Failure to identify arteriopathy?
 - Exercised poor clinical acumen?
 - Failure to refer to MD?
- **A Solution:**
 - Advanced **PostGradDC** online clinical risk management CE.

22

Preventable Error?

● Case Deficits:

- DC failure to perform a thorough history and examination.
- DC failure to request prior medical records.
- Failure to obtain informed consent.
- No documentation of informed consent discussion.



23

Informed Consent



Elements of Informed Consent

- The Joint Commission requires documentation of all the elements of informed consent “in a form, progress notes or elsewhere in the record.”² The following are the elements needed for documentation of the informed consent discussion:
 - the nature of the procedure;
 - the risks and benefits of the procedure;
 - reasonable alternatives;
 - risks and benefits of alternatives; and
 - assessment of the patient’s understanding of elements 1 through 4.



24

Informed Consent

- **Means to Ensure IC:**
 - Compliance Policy
 - Discussion
 - Visible Clarity:
 - Intake
 - Countertop
 - Website
 - Documents for Home
 - Documentation



25

The Informed Consent Discussion

What is Teach-back?

- A way to make sure you—the health care provider—explained information clearly. It is not a test or quiz of patients.
- Asking a patient (or family member) to explain **in their own words** what they need to know or do, in a caring way.
- A way to check for understanding and, if needed, re-explain and check again.
- A research-based health literacy intervention that improves patient-provider communication and patient health outcomes¹.

¹ Schillinger, 2003



26

The Informed Consent Discussion



10 Elements of Competence for Using Teach-back Effectively

1. Use a caring tone of voice and attitude.
2. Display comfortable body language and make eye contact.
3. Use plain language.
4. Ask the patient to explain back, using their own words.
5. Use non-shaming, open-ended questions.
6. Avoid asking questions that can be answered with a simple yes or no.
7. Emphasize that the responsibility to explain clearly is on you, the provider.
8. If the patient is not able to teach back correctly, explain again and re-check.
9. Use reader-friendly print materials to support learning.
10. Document use of and patient response to teach-back.



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27

The Informed Consent Discussion

This is a suggested sample for use in developing an informed consent form and is for reference purposes only. This document does not establish a standard of care. It is intended for use as a tool to reduce malpractice risk and should be edited to fit your practice and to meet the legal requirements of your individual state(s). It also intended to improve communication with patients so they may better understand the treatment recommended. NCMC does not tell chiropractors what to document, but instead advises all chiropractors to use their clinical judgment in determining the need for informed consent and the content of such a form.

Informed Consent Document

PATIENT NAME: _____

To the Patient: Please read this entire document prior to signing it. It is important that you understand the information contained in this document. Please ask questions before you sign if there is anything that is unclear.

The nature of the chiropractic adjustment.

The primary treatment used by doctors of chiropractic is spinal manipulative therapy. I will use that procedure to treat you. I may use my hands or a mechanical instrument upon your body in such a way as to move your joints. That may cause an audible "pop" or "click," much as you have experienced when you "crack" your knuckles. You may feel a sense of movement.

Analysis / Examination / Treatment

As a part of the analysis, examination, and treatment, you are consenting to the following procedures:

- spinal manipulative therapy _____ palpation _____ vital signs
- range of motion testing _____ orthopedic testing _____ basic neurological testing
- muscle strength testing _____ postural analysis testing
- chiropractic _____ laser cold therapy _____ DMS
- radiographic studies _____
- Other (please explain) _____

Analysis / Examination / Treatment

The risks inherent in chiropractic adjustment.
As with any healthcare procedure, there are certain complications which may arise during chiropractic manipulation and therapy. These complications include but are not limited to: fractures, disc injuries, dislocations, muscle strain, cervical spondylolysis, cervicobasilar strain and separations, and hernia. Some types of manipulation of the neck have been associated with injuries to the arteries in the neck leading to or contributing to serious complications including stroke. Some patients will feel some stiffness and soreness following the first few days of treatment. The Doctor will make every reasonable effort during the examination to screen for contraindications to care; however if you have a condition that would otherwise not come to the Doctor's attention it is your responsibility to inform the Doctor.

The probability of those risks occurring.
Fractures are rare occurrences and generally result from some underlying weakness of the bone which we check for during the taking of your history and during examination and X-ray. Stroke and/or arterial dissection caused by chiropractic manipulation of the neck has been the subject of ongoing medical research and debate. The most current research on the topic is inconclusive as to a specific incident of this complication occurring. If there is a causal relationship at all it is extremely rare and remote. Unfortunately, there is no recognized screening procedure to identify patients with neck pain who are at risk of arterial stroke.

This is a suggested sample for use in developing an informed consent form and is for reference purposes only. This document does not establish a standard of care. It is intended for use as a tool to reduce malpractice risk and should be edited to fit your practice and to meet the legal requirements of your individual state(s). It also intended to improve communication with patients so they may better understand the treatment recommended. NCMC does not tell chiropractors what to document, but instead advises all chiropractors to use their clinical judgment in determining the need for informed consent and the content of such a form.

The availability and nature of other treatment options.

Other treatment options for your condition may include:

- Self-administered, over-the-counter analgesics and rest
- Medical care and prescription drugs such as anti-inflammatory, muscle relaxants and painkillers
- Hospitalization
- Surgery

If you choose to use one of the above noted "other treatment" options you should be aware that there are risks and benefits of such options and you may wish to discuss these with your primary medical physician.

The risks and dangers attendant to remaining untreated.

Remaining untreated may allow the formation of adhesions and reduce mobility which may set up a pain reaction further reducing mobility. Over time this process may complicate treatment making it more difficult and less effective the longer it is postponed.

CONSENT TO TREATMENT (MINOR)

I hereby request and authorize (insert your name) to perform diagnostic, test and make chiropractic adjustments and other treatment to my minor son/daughter. This authorization also extends to all other doctors and office staff members and is intended to include radiographic examination at the doctor's discretion.

As of this date, I have the legal right to select and authorize health care services for the minor child named above. If applicable (Under the terms and conditions of my divorce, separation or other legal authorization, the consent of a spouse/partner/spouse or other parent is not required). If my authority to so select and authorize this care should be revoked or modified in any way, I will immediately notify this office.

DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THE ABOVE. PLEASE CHECK THE APPROPRIATE BLOCK AND SIGN BELOW.

I have read / or have had read to me / the above explanation of the chiropractic adjustment and related treatment. I have discussed with (insert your name) and have had my questions answered to my satisfaction. By signing below I state that I have weighed the risks involved in undergoing treatment and have decided that it is in my best interest to undergo the treatment recommended. Having been informed of the risks, I hereby give my consent to that treatment.

Date: _____ Date: _____

Patient's Name _____ Doctor's Name _____

Signature _____ Signature _____

Signature of Parent or Guardian (if a minor) _____



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28

The Informed Consent Discussion

James Demetrius, DC, DABCO
Diplomate, American Board of Chiropractic
Orthopedists
4837 Carolina Beach Road, Suite 205 • Wilmington,
NC 28412 • Telephone: 910-790-8020

Informed Consent Document

Patient's Name:

It is our goal to help you to the best of our ability. Please read this entire document before signing it. It is important that you understand the information contained in this document. Please ask questions before you sign if there is anything unclear.

What to Expect

With your permission, Dr. Demetrius will carefully assess your health. He will talk with you about your health history, examine you, and consider and order necessary tests based on standards of practice and his clinical experience. He will develop a differential diagnosis and make care recommendations. With your consent, he will provide you care to the best of his ability.

Chiropractic Care

The primary treatment offered by Dr. Demetrius is chiropractic adjustments. He may use his hands or a mechanical instrument upon your body in such a way as to move your joints. That may cause a "pop" or "crack" sensation. You may feel a sense of movement. If you feel discomfort with any adjustment, please inform Dr. Demetrius.

The most common side effect of chiropractic care is soreness and stiffness following the first few days of treatment. Sometimes patients experience headaches. This is usually short-term discomfort that is followed by relief.

Risks Inherent to Chiropractic Care

Disc herniations, pinched nerves, arthritic change, and spinal biomechanical issues are very common in many people. Many patients without symptoms have these problems and then aggravate their

conditions through their activities of daily living causing them to seek chiropractic care.

Rarely complications from chiropractic care include but are not limited to fractures, disc injuries, dislocations, muscle strain, spinal cord injury, rib, and joint pain. Arterial dissections and strokes are rare and can lead to death and paralysis. The most current research reveals that chiropractic care does not cause arterial dissections or strokes and further research is necessary. It has been reported that patients with arterial dissections experience neck pain, headache, and neurologic symptoms that cause them to seek chiropractic care. We do our best to ensure that you do not have a developing dissection or stroke.

Please inform us of any risk factors or health issues before and during your care.

- Connective tissue disorder, loose joints, Ehlers Danlos, or Marfan syndrome?
- Recent head or neck trauma?
- Worst headache of your life?
- Elevated homocysteine?
- Recent infection?
- Fluoroquinolone medication in the past (Cipro, Levofloxacin, Norfloxacin, Moxifloxacin, etc.)?
- Trouble seeing or blurred vision?
- Dizziness?
- Difficulty talking, difficulty swallowing?
- Nausea?
- Numbness or loss of sensation?
- Change in bladder or bowel function?
- Weakness of face, arm, or leg?
- Difficulty walking?
- Atrial fibrillation or aural septal defect?
- Coagulation disorder or medication?
- Past history of rib or chest injury or pain?
- Osteopenia or osteoporosis?
- Have you been diagnosed with cancer?

Please inform us of all medical procedures and medications you have taken in the past year:

I will instruct my medical providers to send this office my medical records and inform Dr. Demetrius of my health history.

Medical Referral

Dr. Demetrius strongly suggests that you advise your primary medical practitioners that you are seeking chiropractic care for your complaint. He may refer you to your medical doctor or other practitioners who may offer alternative care. Please advise Dr. Demetrius of any hospitalization, changes in treatment, medication, or surgeries.

Underlying medical issues may not be initially apparent or may seem to be a musculoskeletal problem that does not. Heart problems, kidney, infections, fractures, cancer, etc., can cause spinal pain. Sometimes, these problems are very difficult to diagnose early on. Symptoms may be very slight and may not be severe enough to warrant testing or referral.

I will honestly and regularly inform the doctor of new symptoms, and worsening symptoms, and let him know if you are not progressively improving. If you have an underlying condition and discontinue care without consulting Dr. Demetrius, he may not be able to provide you with proper medical referrals.

Discontinuing Care

If you decide to discontinue care in our office, please advise Dr. Demetrius. You may have a more severe condition that is not responding and may require further medical care and he will make medical referrals specific to help you.

Reporting New Problems

If you experience any new injury, illness, medical care, medication, surgery, or any other changes in your medical history, please inform Dr. Demetrius.

Home Care

Dr. Demetrius may make recommendations for activities of daily living, and home exercises. If any

recommendation produces discomfort during or after activities, please stop immediately and discuss your concerns with Dr. Demetrius.

Consent to Treat Minor

I hereby request and authorize Dr. James Demetrius to perform diagnostic tests and render chiropractic adjustments and other treatments to my minor son/daughter.

Consent

I have read the above explanation of chiropractic chiropractic care and related treatment. I have discussed it with Dr. Demetrius and have had my questions answered to my satisfaction. By signing below, I state that I have weighed the risks involved in undergoing treatment and have decided that it is in my best interest to undergo the treatment recommended. Having been informed of the risks, I hereby give my consent to examinations and treatment:

Date: _____

Patient's Signature: _____

Doctor's Signature: _____

Signature of Parent or Guardian: _____

This Document is a work in progress. Improvements are necessary.



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The Informed Consent Discussion

James Demetrius, DC, DABCO
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4837 Carolina Beach Road, Suite 205 • Wilmington,
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Informed Consent Document

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The Informed Consent Discussion

What to Expect

With your permission, Dr. Demetrious will carefully assess your health. He will talk with you about your health history, examine you, and consider and order necessary tests based on standards of practice and his clinical experience. He will develop a differential diagnosis and make care recommendations. With your consent, he will provide you care to the best of his ability.



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31

The Informed Consent Discussion

Chiropractic Care

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The most common side effect of chiropractic care is soreness and stiffness following the first few days of treatment. Sometimes patients experience headaches. This is usually short-term discomfort that is followed by relief.



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32

The Informed Consent Discussion

Risks Inherent to Chiropractic Care

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33

The Informed Consent Discussion

Rarely complications from chiropractic care include but are not limited to fractures, disc injuries, dislocations, muscle strain, spinal cord injury, rib, and joint pain. Arterial dissections and strokes are rare and can lead to death and paralysis. The most current research reveals that chiropractic care does not cause arterial dissections or strokes and further research is necessary. It has been reported that patients with arterial dissections experience neck pain, headache, and neurologic symptoms that cause them to see chiropractic care. We do our best to ensure that you do not have a developing dissection or stroke.



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34

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Please inform us of any risk factors or health issues before and during your care:

- Connective tissue disorder, loose joints, Ehlers-Danlos, or Marfan syndrome?
- Recent head or neck trauma?
- Worst headache of your life?
- Elevated homocysteine?
- Recent infection?
- Fluoroquinolone medication in the past (Cipro, Levaquin, Levofloxacin, Noroxin, Avelox, etc.)?
- Trouble seeing or blurred vision?
- Dizziness?
- Difficulty talking, difficulty swallowing?
- Nausea?
- Numbness or loss of sensation?
- Change in bladder or bowel function?
- Weakness of face, arm, or leg?
- Difficulty walking?
- Atrial fibrillation or atrial septal defect?
- Coagulation disorders or medicine?
- Past history of rib or chest injury or pain?
- Osteopenia or osteoporosis?
- Have you been diagnosed with cancer?



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35

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Please inform us of all medical procedures and medications you have taken in the past year:



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36

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I will instruct my medical providers to send this office my medical records and inform Dr. Demetrious of my health history.



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37

The Informed Consent Discussion

Medical Referral

Dr. Demetrious strongly suggests that you advise your primary medical practitioners that you are seeking chiropractic care for your complaint. He may refer you to your medical doctor or other practitioners who may offer alternative care. Please advise Dr. Demetrious of any hospitalizations, changes in treatment, medication, or surgeries.

Underlying medical issues may not be initially apparent or may seem to be a musculoskeletal problem that does not. Heart problems, kidneys, infections, fractures, cancer, etc., can cause spinal pain. Sometimes, these problems are very difficult to diagnose early on. Symptoms may be very slight and may not be severe enough to warrant testing or referral.

I will honestly and regularly inform the doctor of new symptoms, and worsening symptoms, and let him know if you are not progressively improving. If you have an underlying condition and discontinue care without consulting Dr. Demetrious, he may not be able to provide you with proper medical referrals.



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38

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Discontinuing Care

If you decide to discontinue care in our office, please advise Dr. Demetrious. You may have a more severe condition that is not responding and may require further medical care and he will make medical referrals specific to help you.



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39

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Reporting New Problems

If you experience any new injury, illness, medical care, medication, surgeries, or any other changes in your medical history, please inform Dr. Demetrious.



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40

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Home Care

Dr. Demetrious may make recommendations for activities of daily living, and home exercises. If any recommendation produces discomfort during or after activities, please stop immediately and discuss your concerns with Dr. Demetrious.



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41

The Informed Consent Discussion

Consent to Treat Minor

I hereby request and authorize Dr. James Demetrious to perform diagnostic tests and render chiropractic adjustments and other treatments to my minor son/daughter.



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42

The Informed Consent Discussion

Consent

I have read the above explanation of chiropractic care and related treatment. I have discussed it with Dr. Demetrious and have had my questions answered to my satisfaction. By signing below, I state that I have weighed the risks involved in undergoing treatment and have decided that it is in my best interest to undergo the treatment recommended. Having been informed of the risks, I hereby give my consent to examinations and treatment.

Date: _____

Patient's Signature

Doctor's Signature

Signature of Parent or Guardian



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43

The Informed Consent Countertop Aid

Be Aware of the Risks and Benefits of Chiropractic Care



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The Nature of the Chiropractic Adjustment.

The primary treatment used by doctors of chiropractic is spinal manipulative therapy. The doctor may use his hands or a mechanical instrument to move your joints. That may cause an audible "pop" or "click," and you may feel a sense of movement.

The Risks Inherent in Chiropractic Adjustment.

Some patients will feel some stiffness and soreness following the first few days of treatment. Fractures, disc injuries, dislocations, muscle strain, myelopathy, rib/joint strains/separations, artery damage stroke and death due to chiropractic care is rare.

The Probability of those Risks Occurring is Rare.

Highly powered research indicates that manipulation does not cause artery damage and the risk is the same as seeing your medical doctor. Fractures, disc injuries, dislocations, muscle strain, myelopathy, rib/joint strains/separations are also rare occurrences.

The Availability and Nature of other Treatment Options.

Other treatment options for your condition may include self-care, self-administered over-the-counter analgesics and rest; medical care, prescription drugs, and pain management; physical therapy, hospitalization; and surgery. There are risks and benefits of such options and you should discuss these with your medical physician.

The Risks and Dangers if you decide to Remain Untreated.

Remaining untreated may cause conditions to worsen. If you discontinue care, prematurely, your doctor will be unable to help you with more serious health issues.



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44

The Informed Consent Countertop Aid



Please Inform the Doctor ASAP...

- YES NO** Have you experienced recent severe head or neck, pain, blurred vision, difficulty speaking or swallowing, confusion, ringing in your ears, dizziness, difficulty holding objects or walking?
- YES NO** Do you or a family member have a connective tissue disorder or loose joint syndrome?
- YES NO** Do you have a history of taking fluoroquinolone antibiotics (Cipro, Avelox, Levaquin, Floxin, Factive, Noroxin)?
- YES NO** Do you or a family member have a history of stroke or aneurysms?
- YES NO** Do you or your family members have artery problems or heart conditions or bleeding disorders? Do you take blood thinners?
- YES NO** Have you been sick recently? Have you tested positive for Covid?
- YES NO** Have you been diagnosed with cancer, diabetes, or arthritis?
- YES NO** Do you have bone-weakening conditions or do you take medication like prednisone? Have you ever fractured a rib or have weak ribs?
- YES NO** Have you suffered recent trauma?
- YES NO** Have you experienced weakness, bladder or bowel problems?

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45

A Standard of Care



Why is Informed Consent So Important?



- College mandated
- Regulatory mandates
- Peers
- Malpractice concerns
- Civil concerns



46

Thank you!



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47