

The Healing Joint

Jeanette Musset, NMD

PATIENT INJECTION CONSENT FORM

The purpose of this document is to provide written information regarding the risks of injections. You will be injected by Dr. Musset with _____. It is important you fully understand this information so please read this document carefully.

Indications:

- Musculoskeletal Pain
- Nerve Pain
- Inflammation

The Procedure:

After the skin surface is cleaned, the skin is injected with a needle attached to a syringe. The injections will be either subcutaneous, intradermal, or intramuscular.

Benefits:

You might receive the benefit of relief from pain and swelling with this procedure but this cannot be guaranteed. Only you can decide if the benefits are worth the risk.

Risks:

Before undergoing one of these procedures, understanding the associated risks is essential. No procedure is risk-free. The following risks are well recognized, but there may also be risks not included in this list that are unforeseen by the doctors.

- There may be allergic reactions to the medicines injected, or to tape, or the chemicals used to clean the skin for instance.
- Pain may be associated with this procedure and the healing process.

Alternatives:

- Conventional corticosteroid injections
- Oral anti-inflammatory drugs such as ibuprofen or naproxen.
- Do nothing

If you have any questions regarding the procedure, risk, benefits or alternatives, ask before signing this consent form. I consent to the injection procedure. I have been informed of the possibility of complications as detailed above, and am happy to accept this. I agree to not hold Dr. Jeannette Musset, responsible.

Patient Name _____ Date of birth _____

Signature _____ Date _____