Informed Consent for Physical Therapy

Dear Patient:

Physical therapy involves the use of many different types of physical evaluation and treatment. At *Provident Physical Therapy* we use a variety of procedures and modalities to help us to try and improve your function. As with all forms of medical treatment, there are benefits and risks with physical therapy.

Since the physical response to a specific treatment can vary wide from person to person, it is not always possible to accurately predict your response to a certain therapy modality or procedure. We are not able to guarantee precisely what your reaction to a particular treatment might be, nor can we guarantee that our treatment will help the condition you are seeking treatment for. There is also a risk that your treatment may cause pain or injury, or may aggravate previously existing conditions.

You have the right to ask your physical therapist what type of treatment he or she is planning based on your history, diagnosis, symptoms and testing results. You may also discuss with your therapist what the potential risks and benefits of a specific treatment may be. You have the right to decline any portion of your treatment at any time before or during your treatment session.

Therapeutic exercises are an integral part of most physical therapy treatment plans. Exercise has inherent physical risks associated with it. If you have any questions regarding the type of exercise you are performing and any specific risks associated with your exercise, your therapist will be glad to answer them.

I acknowledge that my treatment program has been explained by a therapist at Provident Physical Therapy, and all of my questions have been answered to my satisfaction, I understand the risks associated with a program of Physical Therapy as outlined to me, and I wish to proceed.

_____   _____   _____

  Date   Patient Name   Patient Signature

If Patient listed is a Minor:

_____
Parent/ Legal Guardian/ Representative Name

_____
Parent/ Legal Guardian/ Representative Signature

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Relationship to Patient