Intravenous (IV) Infusion Therapy at StemLyft

<u>Wellness infusion</u> aka Myer's Cocktail, the Gold Standard) - Delivers hydration, vitamins and minerals directly into your bloodstream to maximize your overall health and wellness. Since IV vitamin therapy bypasses your digestive system, it is also ideal for patients with malabsorption issues as a result of weigt loss surgery

<u>Energy Booster Infusion</u> - Delivers extra B vitamins to increase your energy, improve your mood and help your body deal with stress. Since B vitamins also increase your metabolism, this booster is ideal for patients who want to maximize their weight loss efforts -

<u>Immunity and Recovery Booster Infusion</u> - Delivers extra Vitamin C to help your body prevent or fight a cold or flu, allergies or any illness. Since Vitamin C also helps your body heal faster, this booster is ideal for post-surgical patients -

<u>Beauty Booster Infusion</u> - Delivers age-busting antioxidants to protect your cells from harmful toxins. Since Vitamin C is needed for collagen production, this booster will help fight wrinkles and fine lines. Glutathione also helps to decrease blemishes and brightens your skin. This booster is great for those who wants PRP facial to get

<u>The Morning After Infusion (Party infusion)</u> - Did you overindulge last night? The Morning After Infusion delivers extra hydration, plus additional vitamins and minerals directly into your bloodstream along with medications for nausea and headaches to help you recover quickly from a hangover - with Toradol, Pepcid, Zofran this combo will reduce symptoms of any hangover

<u>Discount Prices for our VIPs (Very Important Patients)</u>

for those who wants NAD infusion along with those above infusions



INTRAVENOUS (IV) INFUSION THERAPY INTAKE FORM

Patient Information:

Name:			_Date:	
Address:				
City:	State:		ZIP Code:	
Phone:		(C)		(other)
Date of Birth:	Sex: M / F		(MM/DD/YY)	Age:
	Email address:			
case of emergency, please	contact: Name:		_ Phone:	
low did vou hear about us?	Internet Facebook	Walk-in	Friend:	

	Fatigue or low energy Stress Poor diet due to busy lifestyle Brain fog or trouble concentrating Low mood or depression Headaches or migraines Weight gain or difficulty losing weight Slow metabolism		Asthma and Allergies Recent surgical procedure Recent illness Cold or flu symptoms Facial wrinkles or fine lines Dull or dry skin Malabsorption issues O t h e	r -
<u>Which</u>	statements best describe why you are here	today? (Please check all that apply)	
Wa Wa Wa Wa Wa Wa	ant to have more energy and feel better overall ant to do everything I can to nourish my body ant to do everything I can to enhance my weigh ant to prevent getting sick ant to recover quickly from my surgery or illness ant to slow the aging process ant to feel and look younger ant to have smoother, brighter and more vibran ant to cleanse my body of toxins ant to recover quickly from a hangover her	nt loss effor	ts	
	MEDICAL	HISTORY		
Are you p	pregnant or breastfeeding? Yes / No			
Date of la	ast chemistry screen or other lab testing			
Please o	u ever been told that you have an electrolyte im check all that apply) Hypermagnesemia (High magnesium levels) Hypercalcemia (High calcium levels) Hypokalemia (Low potassium levels) Hemochromatosis (High iron levels) Other	balance or	other abnormal labs?	
Are you a	a diabetic? Yes / No			
Are you a	a smoker? Yes / No If Yes, how much do y	ou smoke?	?	
How muc	ch do you drink weekly?		type	
	se any recreational drugs? Yes / No			

<u>Please</u>	list everything you are currently taking:
Prescri	ption Medications – Strength – Frequency – Condition being treated
	ne Counter Drugs – Strength – Frequency – Condition being treated
Vitamin	ns and Other Supplements – Strength – Frequency – Condition being treated
Name a	and DOB:
	MEDICAL HISTORY CONTINUED
Do you	take Digoxin (Lanoxin) for a heart problem? Yes / No take any diuretics or water pills? Yes / No If Yes, please list:
	take any steroids, i.e. Prednisone? Yes / No If Yes, please list:have any medication or food allergies? Yes / No If Yes, please list:
·	
•	have any of the following conditions? (Please check all that apply) Blood pressure problems (High or low)
	Heart Problems
	Stroke or "mini-stroke"
	Kidney Problems
	Kidney Stones
	Asthma
	Optic Nerve Atrophy or Leber's
	Disease
	Sickle Cell Anemia
	G6PD Deficiency
	Sarcoidosis

□ Parathyroid problems (High levels)
List any other medical conditions you have (not mentioned above):

List of all surgical procedures you've had with approximate dates:
Is there anything else you would like to let our medical professional to know:
Name and DOB:
Intravenous (IV) Infusion Therapy
Checklist of what to bring:
□ Your completed Intravenous (IV) Infusion Therapy Intake Form
$\ \square$ A list of all prescription medications, OTC medications, vitamins/supplements that you take $\ \square$
A copy of your most recent bloodwork is helpful
□ Your signed Consent Form
□ Your signed HIPPA Notice
 Make sure you are well hydrated prior to your visit. We suggest drinking 1-2 16oz. bottles of water. Dehydration can make it difficult to insert an IV.
 Make sure you eat something prior to your visit. We suggest a high protein snack, such as nuts seeds, a protein bar, cheese, yogurt or eggs. Low blood sugar can make you feel weak, light- headed or dizzy.

<u>During your first visit for IV Vitamin Therapy infusions:</u>

During the first visit, a medical professional will discuss your main complaints and desired outcomes with you. The NP will review your medical & surgical history and any medications you are taking. Based on this assessment, your Intravenous (IV) infusion will be customized to address

your individual needs. If you have any complex medical conditions, the physician at Houston Medical ER & UC may request you obtain blood work or further testing and/or your personal physician's approval prior to administering any IV infusions.

What to expect:

our IV infusions are given in a peaceful spa setting and leave you feeling calm, relaxed, and refreshed.

Depending on your customized IV cocktail, the infusion can be finished in as little as 20-30 minutes. Our friendly and attentive staff will keep you calm, cared for, and comfortable during your infusion. Patients find the experience tranquil and healing. Patients leave feeling vibrant, energized, and refreshed.

Intravenous (IV) Infusion Therapy Consent Form

This document is intended to serve as informed consent for your Intravenous (IV) Infusion.
(Initials) I have informed the nurse and/or physician of any known allergies to medications or other substances at of all current medications and supplements. I have fully informed the nurse and/or physician of my medical history.
(Initials) Intravenous infusion therapy and any claims made about these infusions have not been evaluated by the US Food and Drug Administration (FDA) and are not intended to diagnose, treat, cure, or prevent any medical disease. These IV infusions are not a substitute for your physician's medical care.
(Initials) I understand that I have the right to be informed of the procedure, any feasible alternative options, and the risks and benefits. Except in emergencies, procedures are not performed until I have had an opportunity to receive sucinformation and to give my informed consent.
(Initials) I understand that:
1. The procedure involves inserting a needle into a vein and injecting the prescribed solution.
2. Alternatives to intravenous therapy are oral supplementation and / or dietary and lifestyle changes.
3. Risks of intravenous therapy include but not limited to:
a) Occasionally: Discomfort, bruising and pain at the site of injection.
b) Rarely: Inflammation of the vein used for injection, phlebitis, metabolic disturbances, and injury.
c) Extremely Rare: Severe allergic reaction, anaphylaxis, infection, cardiac arrest and death.
4. Benefits of intravenous therapy include:
a) Injectables are not affected by stomach, or intestinal absorption problems.
b) Total amount of infusion is available to the tissues.
c) Nutrients are forced into cells by means of a high concentration gradient.
d) Higher doses of nutrients can be given than possible by mouth without intestinal irritation.
(Initials) I am aware that other unforeseeable complications could occur. I do not expect the nurse(s) and/or physician(s) to anticipate and or explain all risk and possible complications. I rely on the nurse(s) and/or physician(s) to exercise judgment during the course of treatment with regards to my procedure. I understand the risks and benefits of the procedure and have had the opportunity to have all of my questions answered.
(Initials) I understand that I have the right to consent to or refuse any proposed treatment at any time prior to it performance. My signature on this form affirms that I have given my consent to IV Infusion Therapy, including any other procedures which, in the opinion of my physician(s) or other associated with this practice, may be indicated.

Discharge Instructions for Intravenous (IV) Infusion Therapy

My signature confirms that I have understood risk & benefits of procedure and wishes to continue with the infusion therapy

How to care for yourself after your IV Vitamin Therapy infusion:

- Apply pressure to site for 2 minutes after IV has been removed
- Keep Band-Aid in place for 1 hour
- Warm packs and elevating your arm can be used for any bruising at the site
- Cold packs can be used for pain relief and to decrease any swelling at the site

- Any swelling should be significantly reduced in 24 hours
- · Post IV infusion symptoms are uncommon. Dehydration is the cause of most symptoms and concerns.
- We encourage you to drink at least 1-2 16oz. bottles of water after your IV infusion.
- If enough water is not consumed, you may experience any of the following symptoms: headaches, nausea, joint pain, blurred vision, cramping (GI and/or muscular), mental confusion or disorientation.

Most patients experience significant overall improvements:

- Better energy
- Better mental clarity
- Improved sleep
- Improvement of their complaints
- Overall feelings of well being

Patients commonly report one of two patterns after an IV Vitamin Therapy infusion:

- Patients generally feel better right away. Due to a busy lifestyle, many people are chronically dehydrated and deficient in
 vitamins and minerals causing them to not feel well. Once the patient is hydrated and the nutrients are replaced, their
 symptoms improve quickly.
- Patients sometimes feel tired or unwell. These patients are generally in the process of detoxifying. When toxins are pulled out of tissues, they re-enter the blood stream. They remain poisons, but they are now on their way OUT instead of on their way IN. Even when patients do not feel well at this stage, the process is one of healing and cleansing. After this period, an overall improvement in one's sense of well-being is generally reported. How often will I need IV Vitamin Therapy infusions?

The number and frequency of treatments will vary depending on certain factors. \cdot Condition(s) being treated

- Current health status of the patient
- Response of the patient to the treatments

A general estimate of the number of treatments needed is discussed during the first visit. As we go along, we will develop a more specific treatment plan. Most patients will require at least 5-10 treatments. Depending on the response, some patients will then go on to maintenance therapy with occasional treatments.

- Any symptoms you are not comfortable with
- If any of the following are progressively worsening after your IV infusion:
 - Significant swelling over the IV site
 - Redness over the vein that is increasing in size
 - Pain in the vein/arm that is not improving over an 8-12 hour period
 - Headache that does not resolve with increased hydration or over-the-counter pain relievers like aspirin, Acetaminophen or Ibuprofen.

HOUSTON MEDICAL ER LOCATED AT 2306 RAYFORD SPRING, TEXAS 77386 281 453 7777 OPENS 24/7 ER PHYSICIAN AND NURSING AVAILABLE 24/4 IF YOU NEED MEDICAL ASSISTANCE.

www. HoustonMedicalER.com 2306 Rayford Spring, Tx 77386 opens 24/7