



HANDS ON HEALTH  
FAMILY CHIROPRACTIC

## **INFRARED SAUNA CLIENT INFORMATION**

\_\_\_ I am already a Chiropractic patient at Hands on Health Family Chiropractic and all of my information should be on file.

(\*Massage Clients must still fill out this entire form. \*\*Chiropractic Clients must still sign the consent portion below.)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Preferred Phone # (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: (mm/dd/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_

Emergency Contact and Phone number:

## **INFORMED CONSENT**

I have read the advisements and contraindications for Infrared sauna use. I have no conflicts for use as described in the advisements and contraindications, or I have provided a doctor's release authorizing use. I consent to the Infrared Sauna Session and confirm that I am at least 18 years of age (or have signed permission from my parent or guardian).

I understand that this is not intended to take the place of medical care or medications. I clearly confirm that I have read the advisements and contraindications, and that I do not have any contraindications to the Infrared Sauna. I understand that I take full responsibility for my own health and well-being.

I understand that the services I am receiving are not intended to treat any medical condition or take the place of medical care or medications. I RELEASE the business, its employees and technicians from all liability associated with using the Infrared Sauna.

\_\_\_\_\_  
Print Name/Signature

\_\_\_\_\_  
Print Name/Signature of Parent or Guardian

Date \_\_\_\_\_



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## **ADVISEMENTS & CONTRAINDICATIONS**

Any of the below described contraindications will require you to use discretion for your own well being. Severe medical conditions will require a note of authorization from your doctor prior to the use of the Infrared Sauna.

**Medications** – Diuretics, barbiturates and beta-blockers may impair the body’s natural heat loss mechanisms. Anticholinergics such as amitriptyline may inhibit sweating and can predispose individuals to heat rash or to a lesser extent heat stroke. Some over-the-counter drugs, such as antihistamines, may also cause the body to be more prone to heat stroke.

**Pregnancy/Breast Feeding** – If breastfeeding or pregnant, you are not permitted to use our sauna. For breastfeeding, a detoxification process will produce the expelled toxins into your breast milk.

**Menstruation** – Heating of the low back area of women during the menstrual period may temporarily increase their menstrual flow. Please be prepared with appropriate extra towels or feminine products to help keep our sauna clean.

**Elderly** – The body must be able to activate its natural cooling processes in order to maintain core body temperature. As we mature, our bodies naturally lose this capability. Guests over the age of 70 will be permitted for infrared sauna use, however, at a lower temperature.

**Cardiovascular Conditions** – Individuals with cardiovascular conditions or problems (hypertension/hypotension), congestive heart failure, impaired coronary circulation or those who are taking medications which might affect blood pressure should exercise caution when exposed to prolonged heat. Heat stress increases cardiac output and blood flow in an effort to transfer internal body heat to the outside environment via the skin (perspiration) and respiratory system. This takes place primarily due to major changes in the heart rate, which has the potential to increase by thirty (30) beats per minute for each degree increase in core body temperature.

**Alcohol/Alcohol Abuse** – Contrary to popular belief, it is not advisable to attempt to “sweat out” a hangover. Alcohol intoxication decreases a person’s judgment; therefore, he/she may not realize when the body has a negative reaction to high heat. Alcohol also increases the heart rate, which may be further increased by heat stress. Guests who appear intoxicated or inform us of alcohol consumption prior to use of the sauna will forfeit their scheduled appointment and no refund or credit will be issued.

**Chronic Conditions/Diseases Associated With Reduced Ability to Sweat or Perspire** – Multiple Sclerosis, Central Nervous System Tumors and Diabetes with Neuropathy are conditions that are associated with impaired sweating.

**Hemophiliacs/Individuals Prone to Bleeding** – The use of infrared saunas should be avoided by anyone who is predisposed to bleeding.

**Fever** – An individual who has a fever should not use an infrared sauna until the fever subsides.

**Insensitivity to Heat** – An individual with insensitivity to heat should not use an infrared sauna.

**Joint Injury** – If you have a recent (acute) joint injury, it should not be heated for the first 48 hours after an injury or until the swollen symptoms subside. If you have a joint or joints that



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are chronically hot and swollen, these joints may respond poorly to vigorous heating of any kind.

**Implants** – Metal pins, rods, artificial joints or any other surgical implants generally reflect infrared waves and thus are not heated by this system. Nevertheless, you should consult your physician prior to using an infrared sauna.

**Pacemakers/Defibrillators** – The magnets used to assemble infrared saunas can interrupt the pacing and inhibit the output of pacemakers. Please discuss with your doctor the possible risks this may cause.

In the rare event that you experience pain and/or discomfort, immediately discontinue sauna use, and exit the sauna