

REGISTRATION & CONSENT FORM - HOMOEOPATHIC TREATMENT

Date: _____		Case No.: _____	
Name: _____		Gender: _____	
DOB: _____	Age: _____	Marital Status: _____	Profession: _____
Address: _____ _____			
Phone No.: _____		Email-Id _____	
Alternate Phone No.: _____			
Diagnosis: _____		Referred by: _____	

Welcome to Healing Harmony Homeopathy & More Clinic. Homeopathy, as a medicinal field, aims to look beyond the mere physical symptoms. It aims to correct the deeper inner disturbances. Unlike other systems of medicine, Homoeopathy does not look at the diseased person in parts, i.e. it does not give different medicines for headache and stomach-ache to the same person. Instead it gives one medicine for the whole individual. Also, no two persons are alike. Similarly, no two persons react alike in sickness. Though suffering from the same ailment, the symptoms of one person may differ completely from the symptoms of another. As a result, everything that sets apart the suffering individual from another person having the same complaint is studied and analyzed. It is thus holistic and individualistic in nature restoring man's health in body, mind and soul.

There is also a lot of material for you to read and understand principles of how homeopathy works, please ask at reception and feel free to discuss with doctor regarding any question(s) you may have.

1. I understand how homeopathy works and its goals.
2. I understand that case-taking is the first step towards treatment at healing harmony. It is a systematic and scientific process that paves the way for the doctors to delve deep into each case and develop an in-depth and a detailed understanding of the patient as a whole being. I am aware my initial case taking may take 30-90 mins approximately. My case history may be taken by an assistant doctor followed by the consultant or directly by the consultant. The case taking will be done with me alone or with the attendant as deemed necessary by the doctor.

An attendant is mandatory for psychiatric, special care cases, minors etc. In general, the privacy of all communications between doctor and you, are completely confidential.

3. I am well aware that I have the option of seeking and/or continuing allopathic (conventional) medical treatment from a physician. It is my responsibility to consult, follow the advice from my primary physician/specialist. It is recommended that I inform my primary care provider that I am receiving homeopathic treatment.
4. I am aware that the outcome and duration of homeopathic treatment vary by individual and cannot be guaranteed.
5. I agree my case history can be audio-video recorded for analysis of my case, establish a protocol for the patient's benefit, and be used for educational and research process which will benefit homeopathic students and scientific progress in homeopathy.

☐ Yes ☐ No

6. Holistic healing therapies often require longer treatments and follow-ups. To benefit our patients/clients, clinic provides economic plans (Ask details at reception or with the consultant) Since these are highly discounted rates, full payment needs to be made at the time of booking the package. No part payments or refund are allowed. Treatment plans cannot be transferred to another person or other services. Treatment Plan is Valid for X-X Duration from date of booking only, if you miss medicines or sessions in between, the plan cannot be extended.

In case you choose to opt for a treatment plan, you hereby confirm that you agree with the aforesaid terms & conditions

- ☐ Yes, I have read, understood the terms of treatment plan
☐ Not Applicable

I confirm I have read this document, had sufficient time to discuss it, I have asked any questions wherever required. I confirm that all the information provided above is correct per the best of my knowledge.

Signature of patient (& parent/guardian in case of minor)

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