
OAKTREE WELLNESS CENTER

INFORMED CONSENT FOR NATUROPATHIC/MEDICAL SERVICES

I, _____, acknowledge that I am accepting treatment from a Naturopathic Doctor at Oaktree Wellness Center. I understand that there are intrinsic differences between the care of Naturopathic Doctors and Medical Doctors. Thomas F Drost is licensed by the State of Illinois as a Medical Doctor and is also a Naturopathic Doctor. Lisa M Drost is licensed by the State of Vermont as a Naturopathic Doctor (Illinois does not currently license naturopathic doctors). At this time, it is my decision to pursue Naturopathic treatment for any condition I have. Also, I understand that, as with any medical treatment, there is no guarantee that this treatment will offer complete resolution to any or all of the conditions I may have.

Oaktree Wellness Center cannot act as your Primary Care Physician (PCP). We do not provide 24 hour call or emergency services. Our office is closed Friday, Saturday and Sundays. We do not maintain hospital admitting privileges. We recommend you have a Primary Care Physician for these services.

Patient/Guardian Signature

Date

Physician/Witness

Date