

# O'Dell Family Chiropractic, 853 Ridge Road, Webster NY

## *TERMS OF ACCEPTANCE*

When a patient seeks chiropractic health care and we accept a patient for such care, it is essential for both to be working towards the same objective.

Chiropractic has only one goal. It is important that each patient understand both the objective and the method that will be used to attain it. This will prevent any confusion or disappointment.

**Health:** A state of optimum physical, mental and social well-being, not merely the absence of disease or infirmity.

**Vertebral Subluxation Complex:** A misalignment of one or more of the 24 vertebrae in the spinal column which caused alteration of nerve function and interference to the transmission of mental impulses, resulting in a lessening of the body's innate ability to express its maximum health potential.

**Adjustment:** An adjustment is the specific application of forces to facilitate the body's correction of the vertebral subluxation complex. Our chiropractic method of correction is by specific adjustments of the spine.

We do not offer to diagnose or treat any disease or condition other than the vertebral subluxation complex. However, if during the course of a chiropractic spinal examination, we encounter non-chiropractic or unusual findings, we will advise you. If you desire advice, diagnosis, or treatment for those findings, we will recommend that you seek the services of a health provider who specializes in that area.

Regardless of what the disease is called, we do not offer to treat it. Nor do we offer advice regarding treatment prescribed by others. OUR ONLY PRACTICE OBJECTIVE is to detect and correct subluxation complex. Our only method of correction is through the use of specific spinal adjustments.

I, \_\_\_\_\_ have read and fully understand the above statements.  
(print name)

All questions regarding the doctor's objectives pertaining to my care in this office have been answered to my complete satisfaction. I therefore accept chiropractic care on this basis.

\_\_\_\_\_  
(signature)

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(date)