INFORMED CONSENT FOR INTRAVENOUS OXIDATIVE THERAPY

Patient: _____ Today's Date: _____

Intravenous Oxidative Therapy. involves removing 60 mL of your own blood under sterile conditions, treating it with 1 mL of anticoagulant (heparin), combining it with 160 mL of sterile saline water along with 50 mL of pure, medical-grade oxygen and ozone, then reinfusing the blood mixture back into your body. To enhance the treatment efficacy, during reinfusion, the blood mixture may be exposed to ultraviolet light.

This form of therapy has been used for several decades in Germany, Italy, Spain, Russia, and Cuba to prevent and reverse many diseases, combat the effects of aging, increase longevity, and improve quality of life. Ozone therapy is known for its safety and effectiveness. And although there are numerous positive medical studies and testimonies, the medical use of ozone cannot be "guaranteed" to cure or improve your condition.

Here are the scientifically-documented potential beneficial effects of intravenous ozone:

- Improves blood flow and transport of oxygen to the tissues by increasing the oxygen content in the blood; increasing nitric oxide production resulting in vasodilation; improving red blood cell membrane flexibility and elasticity; stimulating the release of oxygen from hemoglobin; and lowering blood viscosity (thickness) by decreasing fibrinogen and aggregation (clumping) of red blood cells and platelets.
- Enhances tissue repair and cellular rejuvenation by stimulating the production of bone marrow stem cells, platelet-derived growth factor (PDGF), and transfer growth factor beta 1 (TGF-beta 1).
- Improves the immune system's ability to kill bacteria and viruses by activating white blood cells and stimulating the release of pro-immunity cytokines such as interferons and interleukins.
- Reduces chronic/sustained oxidative stress (a major cause of disease and shortened lifespan) by neutralizing free radicals that damage cell membranes, mitochondria, and DNA. It does so by stimulating the production of the body's own antioxidants (potent free-radical scavengers), namely glutathione peroxidase, superoxide dismutase, and catalase.
- Reduces chronic/sustained inflammation (another major cause of disease and shortened lifespan) by decreasing arachidonic acid and pro-inflammatory prostaglandins.
- Improves mental clarity and combats chronic fatigue by accelerating the Krebs cycle, electron transport chain, and oxidative phosphorylation, which are the main cellular mechanisms for capturing energy from the food we eat and synthesizing adenosine triphosphate (ATP), which is where our cells ultimately get the energy needed to perform their tasks.
- Improves detoxification by oxidizing toxic compounds in the body and enhancing their elimination through the liver and kidneys.
- Reduces pain by stimulating the production of endorphins and decreasing levels of oligopeptides. Endorphins are morphine-like compounds produced by the body. Oligopeptides are compounds that act on nerve endings in damaged tissues and determine the intensity of the pain response.

Contraindications to treatment include blood-coagulation disorders such as von Willebrand's disease, hemophilia, and Factor II, V, VII, X, or XII deficiencies; thrombocytopenia (low platelet count); recent hemorrhagic stroke (ruptured artery in the brain) or internal bleeding of any kind; favism (glucose-6-phosphate dehydrogenase deficiency); hyperthyroidism (overactive thyroid); hypoglycemia; recent heart attack; seizure disorder; uncontrolled hypertension, and ozone allergy. Nutritional supplements containing vitamins C or E should not be taken the day of and the day after treatment. Strenuous exercise should be avoided for at least 2 hours after treatment.

Intravenous Oxidative Therapy is not covered by Medicare or private insurance as they consider it "experimental." Treatment is usually administered twice weekly for a minimum of 10 sessions, and repeated once every 3 months.

Potential side effects may include bruising at the IV site; potential minor bleeding from the heparin; temporary "healing reactions" such as low-grade fever and muscle aches or joint pain; possible drug interactions (e.g., sulfa drugs, tetracyclines, phenothiazines); and a remote possibility of allergy to heparin or photoallergy in the case of allergy to sunlight. Possible complications of nontreatment may include worsening of your condition.

You are to notify us of all prescription medications you are currently taking. In the event of any adverse reaction after treatment, please contact this office for further instructions. If it is an emergency, you are to call 911.

By signing below, you acknowledge that you have reviewed the above information, and have been informed of the benefits and potential risks of treatment, alternative treatment options, and the risks of nontreatment. You also acknowledge that you have been given ample opportunity to ask Dr. Daniel Thomas questions that have they been answered to your satisfaction. You hereby consent to treatment.

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Patient Signature Witness Signature