



FAR Infrared Sauna Consent Form

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. Have you ever used an infrared sauna before? YES | NO
2. Are you pregnant? YES | NO How far along? YES | NO
3. Are you taking any medications? YES | NO
4. Diagnosed with any medical condition, such as Anhidrosis, that may limit or prevent your ability to sweat? YES | NO
5. Do you have unstable angina? YES | NO
6. Have you had a recent heart attack? YES | NO
7. Do you have severe arterial disease? YES | NO
8. Have you been diagnosed with any other medical condition? YES | NO If “yes”, please explain your condition: _____

If you answered “yes” to any of the above questions; have you consulted with your medical provider about using a far infrared Sauna? YES | NO

It is always important to maintain proper hydration levels during far infrared therapy. Dehydration will actually increase carbohydrate utilization and cause less fat to be burned for energy. We highly recommend drinking a minimum of 4 oz. of water prior to entering the sauna and a minimum of 8 oz. of water after sauna use.

INFRARED SAUNA AGREEMENT/ ACKNOWLEDGMENT

1. The use of drugs, medication or alcohol prior to or during the sauna session may lead to dizziness or unconsciousness.
2. Please consult your physician if you are in doubt of your ability to use the far infrared for health reasons.
3. No one under the age of 18 is permitted in the far infrared sauna
4. Discontinue the use of the sauna if you feel light-headed, dizzy or heat exhausted. 5. Sauna sessions should be limited to no more than 45 minutes and temperatures must stay below 145 degrees Fahrenheit.
5. Water bottles are not permitted in the sauna. Clients using any medications must consult a physician or pharmacist prior to the use of the sauna.
6. Pregnant women should consult their physician prior to the use of the sauna. Excessive body temperatures have a potential for causing fetal damage during the early days of pregnancy.
7. For safety reasons, there is a weight limit of no more than 300 lbs. per person in order to utilize sauna.



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Medications:

- Individuals who are using prescription drugs should seek the advice of their personal physician or a pharmacist for possible changes in the drugs effect when the body is exposed to infrared waves or elevated body temperature. Diuretics, barbiturates and betablockers 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.
- The **Elderly**: The ability to maintain core body temperature decreases with age. This is primarily due to circulatory conditions and decreased sweat gland function. The body must be able to activate its natural cooling processes in order to maintain core body temperature. When using with the elderly, operate at a lower temperature and for no more than 15 minutes at a time.
- Cardiovascular Conditions: Individuals with cardiovascular conditions or problems (hypertension / hypo tension), 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
- Chronic Conditions / Diseases Associated With a 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.



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- **Pregnancy:** Pregnant women should consult a physician before using an infrared sauna.
- **Menstruation:** Heating of the low back area of women during the menstrual period may temporarily increase their menstrual flow
- **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 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.
- **Pacemaker / Defibrillator:** The magnets used to assemble our saunas can interrupt the pacing and inhibit the output of pacemakers. Please discuss with your doctor the possible risks this may cause.

I understand that it is my responsibility to request, complete and update a new intake form on my future visits to **Spring House Health & Wellness LLC**. If I experience a change to my Health Conditions and voluntarily accept the risk associated with any other services including but no limited to the Far Infrared Sauna. I agree **Spring House Health & Wellness LLC** and anyone associated with **Spring House Health & wellness LLC** will not be liable for the death or any injury including without limitation, personal, bodily or mental injury, economic loss and any damage to me resulting from negligence.

Client Signature: _____ Date: _____

By signing this, I certify that I am 18 years of age or older.