



# Path to Health Application and Agreement

Carrie Wojciechowski, C.N.

Hi! I'm looking forward to starting our journey together! I understand that health issues are frustrating and sometimes it feels hopeless, so to truly heal the body takes time and trust between you and I. As in all relationships, clearly defining the terms of the relationship from the beginning will lay the foundation for a successful and healthy, healing experience. Please take a moment to read and sign the following, and return it with your other intake forms.

**Please read each section below and initial that you understand and agree.**

## **About Nutrition Therapy**

\_\_\_\_ There are many different thoughts about nutrition these days. There's the Whole 30, Paleo, Keto, etc. While each of these eating plans have good parts to them, they don't address individual needs, lifestyles and people's current health status. For example, if you have high cholesterol, suffer from constipation, bloating or migraines, Keto isn't a good option for you. If you're an A blood type, the Paleo way of eating probably won't work. My approach is to look at your blood type, your food likes and dislikes, symptoms, and blood work, and create a plan that will get you to your goal. You may discover that foods you thought were ok are actually causing digestion issues or inflammation.

During our time together I will:

- Evaluate system and organ function/dysfunction
- Evaluate and Identify your vitamin and mineral deficiencies
- Make specific food and vitamin/mineral recommendations
- Identify foods that cause inflammation and digestion issues
- Help you get rid of carb and sugar cravings
- Give you healthy, delicious recipes and eating out options
- Create a sustainable way of eating that helps you reach and maintain your health goals

I don't want you to feel like you're living in a deprived bubble, and results will come as quickly as you're willing to make necessary changes and be consistent with those changes. Feedback from you is critical throughout our process. If you don't like something I recommend, tell me so we can modify or do something else.

## **Appointments, Fees & Payment**

\_\_\_\_ The fee for services (\$175 for a 90 min. evaluation, \$85 per 60-min. follow up session) was discussed prior to our initial session. You have two (2) options for payment of our sessions: 1.) Keep a credit card on file and pay as you go, 2.) Purchase a package of 5 or 10 sessions at a discounted rate. Payment can be made by cash, check, credit card, Venmo or Zelle. In order to cover bank fees, there will be a service charge of \$25.00 on any returned check. All fees are subject to increase; however, should that occur you will be given 30 days advance notice of the increase.

\_\_\_\_ Follow-up appointments consist of 60-min. sessions. In order to be effective, nutrition counseling needs to take place on a regular basis. The best results will occur when appointments are scheduled consistently and attendance is regular. Because of the nature of nutrition counseling, I have a 24 hour cancellation policy or you will be charged \$85 for your missed appointment. That time slot is set aside for you so please respect my time as I respect yours. Also, Monday appointments must be cancelled/rescheduled by no later than the Friday morning before.

\_\_\_\_\_ Reminder texts/emails will be sent 12-18 hours before your appointment as a courtesy, but you are responsible for knowing when our next appointment is scheduled for, and you will be held to my cancellation policy whether or not you receive the reminder text/email.

### **Telephone Calls/Emails/Texts**

\_\_\_\_\_ When necessary I will be available to consult with you by phone or email about the following issues:

- Finding the right ingredients at the store
- Modifying recipes that I've given you so that you like the taste
- Questions/concerns about how you feel i.e. "I'm starting the digestive tea and now I'm burping a lot. Is this normal?"

\_\_\_\_\_ Any other questions should be written down and discussed at our next appointment. If a symptom or issue pops up (i.e. you've had extreme stress and it's causing digestion or sleep issues) and we don't have an appointment scheduled that week, we'll need to schedule a phone or in person appointment to address it. If it doesn't require the full hour to address, you have the option to schedule a 20-30 minute appointment for a prorated amount. Please note that I do not carry a pager, but check messages frequently and generally return calls by the end of the day. If I don't respond, please assume that I didn't receive your email or text and reach out again. Please note that if you feel like a situation is an emergency, or that you or somebody else is unsafe, please do not wait for me to call back. Contact 911 to resolve the immediate situation, and know that I will contact you as soon as I can.

### **Confidentiality**

\_\_\_\_\_ I follow HIPAA compliance regulations, and you are entitled to a confidential relationship with your nutritionist. As such your nutrition counseling sessions are private, and the content of those sessions will be held in the strictest of confidence and will not be shared with anyone without your verbal or written consent. Please know, however, that there are a few important exceptions to confidentiality, which you must know about. The following are the legal exceptions to confidentiality:

1. Suspected physical or sexual abuse or neglect of a minor under 18 years of age.
2. Suspected physical, sexual, or financial abuse or neglect of an elder or dependent adult.
3. A client who poses a significant threat of harm to self or others

### **Termination**

\_\_\_\_\_ There is no set amount of time it takes to complete nutrition counseling as every body is different and moves through their work at their own pace, having differing needs and goals. Typically, as it becomes evident that you have met your goals of nutrition counseling and you are satisfied with how far you have come, we will begin to discuss a maintenance/termination plan. At that time we will make a plan together which may include tapering off sessions over a period of time and/or scheduling follow-up "check-in" sessions. Termination is an important part of the process where changes are reviewed and solidified and together we will bring the journey to a comfortable close.

If for some reason you should decide to end therapy without going through a planned termination, I ask that you agree to come into the office for at least one final session so that we can discuss your decision, and reach closure of our relationship.

Thank you for taking the time to review this consent and information form. Should you have any questions or concerns about anything in this agreement you are encouraged to discuss them with me in session. I look forward to developing a trusting, open, and healing therapeutic relationship with you.

Sincerely,

Carrie Wojciechowski, Clinical Nutritionist

I have read and understand and agree to all of the terms and conditions stated above regarding nutrition counseling. I understand that I am responsible for all charges for services, and agree to pay for services under the terms described above. I hereby give my consent for treatment under the above terms.

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_