

Beacon Integrative Medical Center

859 S. Yellowstone Hwy #3201, Rexburg, ID 83440
(208) 359-2101

Dear Friends,

We are excited to announce that we have added to our team here at BIMC. Dr. Jatta is a Board-Licensed Physician by Naturopathic Physician Medical Board of Arizona and also a member of Arizona Naturopathic Medical Board. He has an extensive clinical experience in Holistic Care, Primary Care, Chronic disease, hormones, pain and weight management. His clinical approach focuses on treating the root cause of disease incorporating the art and science of medical treatments that integrates holistic/naturopathic and conventional approach. His approach to medicine involves providing an individualized, comprehensive diagnostic testing and extensive history to guide treatment protocols that is scientific and evident-based in addressing the root cause of disease/treating the whole body.

Dr. Jatta's beautiful wife and a daughter play a significant role in the way he values life, family and health. He is hard-working, enjoys working out and spending plenty of time with his family. His passion and journey into medicine started after family and personal medical history of chronic disease inspiring his interest and curiosity in many disease processes. Over the past couple of years, he managed many disease processes in acute and chronic presentation through naturopathic and conventional approach. His goal is to provide quality and compassionate care to every one of his patients, and he will be a valuable resource and partner in your health journey.

We are honored you have considered joining us at our **WELLNESS WEEK!** You may have some questions on *what to expect* and *what procedures* will be performed. This packet will help answer some, if not all, of your questions. Should you have further questions after reviewing, please call us so we can assist you. Also, we ask that you review this packet at your earliest convenience, as we need this paperwork filled out and returned to us **ASAP**. **(NO LATER THAN THE MONDAY PRIOR TO YOUR ARRIVAL.)** After receipt of paper work we will schedule a phone consult with you. This will allow us to personalize the care we provide to you. We look forward to seeing you soon!

DEPOSIT-A deposit of \$2500.00 is required in order to reserve your spot. (Spots are NOT reserved without deposit.) To provide the most personable care, we cap at 14 clients each Wellness Week. If you are unable to attend the week you initially deposited for, you may opt to rollover the deposit to a future Wellness Week. This may be done with no penalty (if our office is notified by the Wednesday prior to Wellness Week). Please note this option is only permitted twice before a 10% penalty is applied, as this spot is reserved for you, preventing another client to fill it. If you fail to notify us by the deadline, a 25% fee will be applied against your deposit. If unable to attend a future Wellness Week, a refund will be issued (if we are notified at least 5 days prior to the first day of Wellness Week). However, there will be a \$700 fee. This covers the credit card fees, the time invested, and research performed to offer you the most beneficial and personalized care. If you fail to give us 5 days' notice, then you will forfeit 50% of your deposit.

Initial _____

What therapies will I be receiving?

- 1- LSA Body Scan (30 min)
- 4- I.V. Therapies (Chelation and/or Nutrients)
- 4- Glutathione Therapies
- 1-Blood Draw (Lab work)
- 2- Ionic Foot Bath Therapies
- 2- Foot Zone Therapies
- 2- Emotional Balance Sessions
- 2- Colon Hydrotherapies
- 2- Laser Therapies
- 2- Ozone Therapies
- 2- Massage Therapies
- 2- Far Infrared Sauna Sessions
- 3- Hydrotherapies
- 1-Darkfield Session
- Stem Cell therapy
- Nutritionist

This may seem like *a lot* of therapies to do in one week. Well, it is! In order for the body to be cleansed thoroughly we have organized specific protocols for you while you are here. Many of the listed therapies above will help break down and release toxins from your body. If we allow these toxins to circulate in our blood stream without eliminating them, we have only allowed them to *rehome* themselves and begin to cause dis-ease.

Cleansing isn't the only reason you want to attend this week though. Yes, cleansing your body is vitally important for proper system function, but *rebuilding* weak cells to create *happy healthy* cells is also important and has become our second task. For this reason, we have incorporated several therapies to help rebuild your body through our protocol. These therapies will help strengthen your body and vitalize you. The most revolutionary regenerative treatments now being offered at our office is the amniotic and umbilical stem cell (Mesenchymal) treatments. These are FDA regulated and contain growth factors, hyaluronic acid, cytokines and stem cells. More information on the Stem Cells, where we get them, and how they are regulated is attached to the end of this information packet.

Emotional balance is also a huge part of health. Many of you may be in chronic pain or have symptoms that have not been recognized by other practitioners. In these situations, it's easy to get discouraged. You may feel that past health paths have left you drained and unsure. No matter how small or severe your health issues are, they still have an emotional effect on you. It's important for this area of wellness to be addressed, and this week's therapies were designed with this in mind.

We are excited to help you bring balance to your health. **We hope you understand how important each therapy is individually and combined.** Many people feel that following just one approach will allow them to achieve their health goals, but when you look at the body as a whole you will quickly understand why *one therapy isn't enough*. This balanced schedule brings health through cleansing, strengthening, supporting, and rebuilding. If you were to take any of those away your body couldn't achieve full health.

We stress that each therapy is vitally important for proper detox. For example: If the ionic footbath is removed from the protocol, the Chelation Therapy *will not* have a strong detox. You see, the Chelation Therapy helps pull stored toxins (such as heavy metals) out of the body. Not all of these toxins can be flushed out through your urinary tract. Those that are not flushed will be caused to resettle or find a new home and possibly creating a new symptom. When you include the ionic foot bath therapy and the other recommended therapies, the toxins will be flushed in multiple ways, leaving your body cleaner. This is **vitally** important for later in the week, which will allow the stem cells to take hold and repair the body. Each therapy is placed in the protocol for a **very** specific purpose.

We know many of you have been from doctor office to doctor office looking for help with your health and still haven't found answers to your issues. It is important to remember that during this week we are not focusing on only one problem but on your body as a whole. **No one treatment** is a cure all and anyone who says it is, should be questioned. A lot has gone into designing this special holistic week and we look forward to helping you reach your wellness goals.

Thank you,

The Team at Beacon Integrative Medical Center

Where and When

The address is **859 S. Yellowstone Hwy #3201, Rexburg, ID 83440**. The office phone number is **(208) 359-2101**.

There may be some wait time throughout the days. We would recommend you bring forms of "entertainment" such as books, iPads, etc. This will help pass the time during any waiting period.

WIFI

Network: CODA-2CEO Password: 25118A089759

You will be at the office for most of the day. There may be some time between therapies to go grab something to eat. However, other times there is not much time because this week is packed full of so many therapies. We recommend bringing snacks or packed lunches. We provide a fridge should you need to chill any items. All therapies will end by 6 pm. Which will allow you time for dinner afterwards. Remember that your body is going through a cleansing process, and we would recommend drinking plenty of water, and taking the needed time to relax each day after you leave the clinic. This will allow your body to recover, repair, and heal.

We also recommend you wear clothing that is comfortable, because we recommend you undressing for a few of the therapies (sauna, massage, hydrotherapy, etc.). Also, comfortable shoes will be of benefit to you as well. We will ask you to take your shoes off for the ionic footbaths and foot zones.

At check-in the remaining balance will be due. Our office accepts several forms of payment (Visa, MasterCard, cash, and or check), but we prefer **cash or check**.

During the week you may experience detox symptoms. These symptoms occur from the toxins being released in the body at higher amounts. This is a *normal* response and shouldn't cause you to worry. Symptoms include but are not limited to headaches, fatigue, body aches and pains, and worsening of current symptoms. For this reason, we again **stress the importance** each therapy has on detoxing your system. Not all people will have signs of detox. If you are concerned please notify the person performing the therapy *at the time*.

It is also important to understand if you are participating in the stem cell therapy that you will achieve far better results with each therapy. We have developed this system of therapies to aid one another for optimal support. **If you are going to put the time, effort, and money into the week we highly recommend getting the full benefits.** *No one or two therapies alone will give you the full benefits.*

Services/ Therapies

The information provided below is *only a description of some* of the therapies that you will be having during you week with us!

- **Limbic Stress Assessment (LSA) Scan:** Over hundreds of years, Eastern medicine has come to understand the human body's modes of communication. *Acupuncture* and *Acupressure* are common ways to assist the body through these channels. **Now, with computer technology,** we can use these same channels to painlessly and immediately pinpoint areas of body stress to assist your body as effectively as possible.
By measuring *electrical conductivity* through important communication points on your hands, we can measure the level of **toxic stress** on your *organs and systems*. The Limbic Stress Assessment system is designed to effectively address those areas of stress and determine the best solutions possible.
The procedure is **simple, painless, and sterile**. Clients simply place their hands on the Limbic Arc hand cradle and the computer runs through a sequence of tests. The LSA System tracks your body's *physiological stress level* and records changes that occur throughout the test. By recording and analyzing these responses we can pinpoint a clinical approach that will provide you the greatest personalized benefit in the least amount of time.
- **Foot Zone Therapy:** Within each person's feet lies a **detailed and complex** signal system. This signal system is thought to be connected to **every part of the human anatomy-** the **circulatory, lymphatic, nervous, skeletal, endocrine, digestive, respiratory, reproductive, and muscular**

system, as well as the **emotional** and **spiritual** bodies. These signals are believed to run throughout our bodies, especially to the extremities, *the ears, hands and especially the feet*. Extensive research has proven the feet to be very accurate in correlating the mapped reflex points to the systems of the body. With this mapping, a trained and certified Foot Zone Balance practitioner is able to access the body. Foot Zone Balancing is a method believed to correct and renew the entire body on a cellular level. From the beginning, each cell in our bodies has been programmed with immortal memory, meaning that **the cell has the knowledge and capability of renewing itself**. Our DNA pattern holds a perfect blueprint of our body and is able to **heal and rebuild the perfect cell**. We daily become subject to a host of toxins, from the air we breathe, to the food we eat, and the water we drink. Compounded with their toxins, we regularly experience health robbing stress and it unquestionably takes a toll on us. Foot Zone Balancing is a method believed to correct and renew the entire body at a cellular level enabling the body to become rejuvenated allowing our original DNA patterns to be reconnected. – www.wedofeet.net

- **Far Infrared Sauna:** Extremely beneficial to good health in many ways. Unlike steam saunas which warm the body *from the outside-in*, using steamed heat. Far Infrared Saunas heat the body *from the inside out*. They are able to heat the body to a higher temperature using **less** heat than regular steam saunas. They use infrared rays that penetrate 1-1 1/2 inches into the body. **Some** of the great health benefits, include the following:
 - **Increases circulation**
 - Helps *break down cellulite*
 - Helps with *joint discomfort* issues
 - Helps the *cardiovascular system*
 - Helps *detoxify* the body
 - Helps *fight bacteria and viruses*
 - Helps *increase flexibility*
 - Helps with *general pain relief*
 - Aids in *relaxation* and gives a *feeling of rejuvenation*
 - The far infrared sauna also includes an option of *chromotherapy*. Chromotherapy, or color therapy, uses seven different colored lights that emit different energies or frequencies to help treat various issues.

- **Ionic Foot Bath:** An *ion* is a charged atom that has gained or lost an electron. It creates a magnetic field capable of **attaching to**, and **neutralizing**, oppositely charged particles. These neutralized particles are extracted from the body through the process called **osmosis**. Osmosis is a scientific term that is used to describe the movement of particles through a membrane from an area of low concentration to an area of high concentration. In this case, the higher concentration refers to the ion field that is set up by placing an element into water while running the unit. The element is placed in water between the feet while the power supply delivers a **low level direct current** to the element. This causes the metals within the element to combine with water

and salt to generate a positive and negative charged ion by *separating oxygen and hydrogen* in the water.

- **Dark Field Microscopy:** Presently, Dark Field Blood Microscopy is the **only** way to observe live blood cells. Practitioners take a small amount of blood from a patient, apply the sample to a slide and observe the blood. Most blood-microscopes come equipped with a camera and video equipment, *allowing both the practitioner and patient* to view the specimen *together*. In addition to *red blood cells* (RBCs), *white blood cells* (WBCs) and *plasma*, blood microscopy is believed to show items **within the plasma** such as: **undigested food particles, fungus, crystals, microbes, and bacteria**. Many practitioners also claim to observe *pleomorphic activity, the condition of major organs, mal-absorption of proteins, lipids and nutrients and immune system disorders*.
- **IV Nutrient Therapy:** Intravenous (IV) nutrition therapy is a therapy that delivers vitamins, minerals, amino acids, and other natural substances directly into your bloodstream. While oral substances require your digestive track to process the nutrient (which can also lead to deficiencies if malabsorption is an issue), IV nutrition feeds vitamins directly to your blood stream. This allows them to skip pass the digestive system resulting in significantly quicker results. IV Nutrient Therapy can assist: Illness prevention, Healthy Aging, Increase cellular efficiency, balance nutrient levels, speed up recovery and healing, boost immunity, assist detoxification, and benefits many health conditions.
- **Ozone Therapy:** Ozone therapy works by increasing the amount of oxygen in the body via various methods, usually involving its mixture with various gases and liquids before injection, with potential routes including the vagina, rectum, intramuscular (in a muscle), or intravenously (directly into veins). Ozone can also be introduced via autohemotherapy, in which blood is drawn from the patient, exposed to ozone and re-injected into the patient. Oxygen is a safe, natural detoxifier and cleanser and has been shown to have antiviral, antibiotic, antifungal, anti-parasitic and antimicrobial activity. Every cell in the body needs adequate amounts of oxygen for proper detoxification, respiration and metabolism.
- **Ultraviolet Blood Irradiation (UBI) :** is a procedure in which blood is exposed to light to heighten the body's immune response and to kill infections. When exposed to Ultraviolet light, bacteria and viruses in the bloodstream absorb excess photonic energy causing them to die. This means the fragments of the killed pathogens create a safe, autogenous vaccination-like response. Your red and white blood cells however are cleaned and energized by this same process. This accelerates and directs your immune system to fight the specific infections your body is attempting to eliminate. The result is a continued attack on these infecting agents throughout the body.
-The UBI treatment is not for everyone that comes to clinic, and only administered under Dr. Jatta's recommendation after your initial appointment with him.

- **Massage Therapy:** Therapeutic Massage is not only relaxing but **very** beneficial to overall health. *Accidents, injuries, trauma and even everyday stresses can cause toxic build up in our bodies.* **Regular** massages help *release* these stored toxins, which if left in the body can lead to many health problems. Massage also *relaxes the mind and rejuvenates the spirit* in a calm and comfortable setting.
- **Systematic Release/ Emotional Balance:** This technique involves working with an individual's *electromagnetic and magnetic* field to **release blocks, balance chakra** systems and aid in **releasing meridian pathway abnormalities**. As well as releasing the emotional and spiritual trauma often related to a physical illness. This brings **both** the emotional and physical bodies into balance.
- **Nutrition:** Food is more than just what we eat. It's the material that gives us energy, makes up our every cell, and influences our DNA. Good nutrition is foundational to whole body healing. The nutritionist will work with you to develop a whole food plan and nutritional recommendations tailored to your specific needs and provide follow up support for six weeks after your clinic visit

Along with these procedures the following will be provided at the office: **Colon hydrotherapy, Radionics/laser therapy, and supplementation recommendation.**

Remember with all the detox going on this week it can be common to have several symptoms of detox which include *but are not limited to headaches, fatigue, body aches and pains, and worsening of symptoms*. This isn't a common issue as most people feel the benefits quickly, but **please remember this may happen.**

Things to Remember

1. Remember you **need** to have breakfast *before* you arrive to insure you are prepared to do therapies.
2. Bring "entertainment" (books, iPad, etc.)
3. It is preferred that you bring a check or cash for the remaining balance owed. If that is not an option you will need a Visa or MasterCard to pay the remaining balance and for any other supplementation you choose to purchase.
4. Should you feel more comfortable in the sauna wearing a swimsuit or shorts be sure to bring this item with you. However, this is not needed as towels will be provided. This will not be done as a group - the sessions are private.
5. Bring snacks for munching. Especially Monday as you will not know your schedule when you arrive.
6. It is **Your RESPONSIBILITY** to find lodging and meal accommodations during this week. Listed below are Hotels in close proximity to the office.
 - AmericInn (208)356-5333
 - Spring Hill Suites (208)356-3003
 - Comfort Inn (208) 359-1311
 - Super8 (208) 356-8888
 - Hampton Inn & Suites (208) 497-0424

7. People are traveling from many places to take advantage of this unique opportunity, **please be respectful** of other clients and allow them to have the healing experience they need.
8. Our office has been designed to accommodate a small number of clients at a time. This allows us to make sure everyone is getting the specific, individualized care that they need. We understand that some may have family or friends coming with them. We welcome that but, due to limited space and seating we ask that you do not bring large groups of people with you. *If you have children, please make arrangements for them to be cared for while you are occupied with therapy sessions.*
9. People may experience detox symptoms that may manifest or heighten *preexisting* symptoms such as **headaches, flue like symptoms, fatigue, joint ache, body aches, etc.**

CONSENTS

I understand that the following services are not diagnostic and received under no direct. By signing below and initialing each therapy, I acknowledge that I am releasing responsibility from the practitioners and giving my consent. I am choosing to participate in these services under my own free will. I am not being forced into any therapy and will not find the therapists responsible for any outcomes of the therapy. I take full personal responsibility for my own wellbeing and health. I have also been given the opportunity to ask questions regarding each individual therapy.

Limbic Stress Assessment (LSA) Scan: I have been informed about the therapist and procedure:

- The Technology being utilized in these testing procedures was not designed for, nor being used as diagnostics.
- I understand that no warranty or guarantee has been made to me as the result of these procedures.
- It is possible to experience a healing reaction from the recommendations that follow the procedure.
- It is my responsibility to inform the technician/ practitioner of any and all medications I am taking.
- I understand that though there may be references to body tissue, organ, or organ systems during the course to the session and thereafter, these references are made only in their association with the energetic conductivity of their related meridians (energy pathways).
- I understand that this practice is not presented to me as an alternative to any kind of healthcare. It is presented to me in cooperation and conjunction with any other healthcare decision that deem necessary or appropriate. It does not replace the advice or recommendations received from my personal healthcare practitioner. If I suspect any medical intervention, I will consult my own physician.
- I understand that the technician/ Practitioner is not my primary care physician.
- I understand recommendations for supplementation comes from the evaluation from the LSA Body scan. These recommendations are not to replace any medications from my medical provider but are to work in-hand with the medical providers' recommendations.
- Any decision to follow through with the protocol is my own choice.

Initial _____

Foot Zone Therapy: I have been informed about the Foot Zone Therapist and therapy:

- Therapist is not a Doctor.
- Does not practice medicine.
- Does not diagnose or treat for specific illness.
- Does not prescribe or regulate medication.
- Is not a substitute for medical treatment but is a complement to most types of therapy.

By initialing below, I give consent to a foot zone session. I understand that I may discontinue this session or future sessions at any time. If I have been diagnosed by a licensed health professional as having any disease, injury, or other physical or mental condition I understand that I should inform the person who made the diagnosis about the sessions you will be receiving, and whether or not you intend to discontinue any treatment or therapy which had been previously ordered, prescribed, or recommended by a licensed health professional. I understand that by discontinuing any such treatment or therapy, I assume responsibility for any negative outcome resulting from discontinuing that treatment or therapy. A Foot Zone Practitioner may not diagnose disease, injury, or disfigurement. Only licensed health professionals may perform diagnosis. The Foot Zone Technique is not a substitute for medical care. If I am experiencing any specific medical problem and have not seen a medical doctor, I understand that it is recommended for me to see a physician today. If I am unsure of the nature of the condition, I have been encouraged to consult an appropriate licensed health care professional such as a physician.

Initial _____

Ionic Foot Bath: I understand the following information about the Ionic Foot Bath.

- I certify that I am not on any heartbeat regulation medication.
- I have not had an organ transplant.
- I am not taking any medications that the absence of would mentally or physically incapacitate me.
- I am not pregnant or nursing
- I understand the risks and take full responsibility for any consequences or side effects that might follow.

Initial: _____

Massage Therapy: I have been informed that a Massage therapist and Therapy:

- Does not diagnose illness, disease, or another physical or mental disorder. As such, the massage therapist does not prescribe medical treatment or pharmaceuticals, nor do they perform spinal manipulation.
- Does not substitute for medical examination or diagnosis and that it is recommended that I see a physician for any ailment that might concern you.
- Does not offer any services involving sexual stimulation. Any requests for such will result in the discontinuation of the massage with full payment for the time reserved.
- I also understand that massage in its various forms is given here for the purpose of stress reduction, for increasing circulation or energy flow, and for the relief from muscular tension, spasm, or pain.
- I also understand that information exchanged during any massage session is educational in nature and is intended to help me become more familiar and conscious of my own health status and is to be used at my own discretion.
- I take it upon myself to inform the therapist of any physical, mental, or emotional conditions that I am aware of at the time of the massage and take it upon myself to keep the therapist updated on my health.

By initialing below, I give consent to the Massage.

Initial _____

Colon Hydrotherapy: I have been informed on Colon Hydrotherapy and the Therapist.

- I understand Colon Hydrotherapy is an invasive procedure.
 - I understand that colon Hydro-therapist is licensed
 - The therapist is not a Doctor
 - The therapist cannot prevent, treat or diagnose.
 - The Therapist will be in the room through the whole procedure.
 - Once the procedure has started, I cannot opt out without allowing the therapist to finish flushing the bowls.
 - The therapist has the right to use massage and reflex points on the body.
 - I have the responsibility to inform the therapist of any discomfort, pressure, feeling faint, or another emotion, feeling, or discomfort that changes during the procedure.
 - I take full responsibility for any side effects that occur after the therapy.
 - If I have any symptoms that occur, I understand it is my responsibility to seek after medical assistance.
- By initialing below, I give consent for Colon Hydrotherapy.

Initial: _____

Emotional Balance: I have been informed about the Emotional Balance and the Therapist.

- I request and consent to the performance of energy healing modalities and therapies within the scope of the practitioner.
 - I understand methods of therapy may include but are not limited to: energy balancing and harmonizing, visualizations, energy medicine routines and education, and education about spiritual benefits and healthy life.
 - I will immediately notify my energy practitioner of any unanticipated or unpleasant effects associated with any of the energy modalities applied.
 - I have been informed that Energy medicine is generally safe method of treatment. I have been notified that energy shifts may occur and create some physical, emotional, or spiritual side effects (Muscle soreness, tingling, headaches, changes in relationships, mile fatigue, energy movement, etc.).
 - I understand that all sessions will be kept confidential among the practitioners in First Step to Wellness Clinic.
 - I take personal responsibility for my well-being and with respect for myself I gratefully accept control of my choices. My heirs, guardians, legal representatives, and I hereby and forever release, waive, and discharge any claims against the Energy Balance Practitioner.
 - I take full responsibility and am responsible for all liabilities for loss or injury incurred while in association with or applying energy techniques and information learned from the Energy Practitioner.
- By initialing below, I give a waver and release of potential liability.

Initial _____

Far Infrared Sauna: I have been informed about the Far Infrared Sauna.

- I understand that this is not a treatment, cure, or preventative therapy.
- I understand I am not to use the Sauna if I am under the influence of alcohol or drugs
- I understand that I am not to use the sauna if I am pregnant.
- If I am on any prescription drugs, I need to consult my physician before use.
- I am responsible for my personal belongings while in the sauna.

- Any expenses due to injury received while in a sauna session will be my responsibility and not the clinics.
- I will not eat or drink while in the sauna.
- I will not exceed the allotted time for the sauna session of 45 min.
- I understand the following benefits to the Far Infrared Sauna do not apply to each individual user of the sauna: increase circulation, burn 600 calories in 30 Min, breakdown of cellulite, helps Arthritis issues, helps the cardiovascular system, detoxes the body, fights bacteria and virus, increases flexibility, pain relief, and relaxation and rejuvenation. Every benefit is on an individual basis.
- I understand it is my responsibility to ensure I have been properly hydrated before each sauna use to help prevent dehydration.

I have been informed and give consent by initialing below.

Initial _____

Laser/Radionics/Sweep/Light Therapy: I have been informed on the Laser/Radionics/Sweep/Light Therapy and the therapist.

- I understand this practitioner is not a medical doctor.
- I understand this practitioner does not treat, prevent, cure, or diagnose.
- I understand this therapy can cause feelings that are not limited to weakness, dizziness, fatigue, headaches, blurred vision, etc.
- I understand it is my responsibility to inform the practitioner of any symptoms that occur during or from the therapy.
- I understand that any discussion during the therapy is solely for my benefit and is not to be taken as counseling or any form of treatment, diagnosis, or cure, and is for me to use as I see fit.
- I do not hold the practitioner or clinic responsible for any injury or harm that may occur during this session.

By initialing below, I give consent to the therapy.

Initial _____

Dark Field Microscopy: I have been informed on Dark Field Microscopy and the Therapist.

- This procedure is not a diagnostic test.
- The therapist is not a medical doctor and does not diagnose, treat, cure, or prevent disease.
- This procedure does require a drop of blood from your finger.
- The therapist will discuss what they see in the blood. They have been trained for this specific procedure, but the things discussed are for personal information and not for diagnostic purposes. Presently, dark field blood microscopy is the only way to observe live blood cells. Practitioners take a small amount of blood from a patient, apply the sample to a slide and observe the blood. Most blood-microscopes come equipped with a camera and video equipment, allowing both the practitioner and patient to view the specimen together. In addition to red blood cells (RBCs), white blood cells (WBCs) and plasma, blood microscopy is believed to show items within the plasma such as: Undigested food particles, Fungus, Crystals, Microbes, Bacteria. Many Practitioners also claim to observe pleomorphic activity, the condition of major organs, mal absorption of proteins, lipids and nutrients and immune system disorders.

By initialing below, I give consent for the therapy.

Initial: _____

Nutrition: The information and meal plans provided by Angela are intended for your general knowledge only and are not a substitute for medical advice, treatment, or for specific medical conditions. No nutrition services shall be used to diagnose or treat any health problem or disease. Seek prompt medical care for any specific health issues and consult your physician before altering your diet. The information and recipes provided should not be used in place of a consultation with your physician or other health care provider.

Initial: _____

Privacy Policy: We here at Beacon Integrative Medical Center value our clients and our relationships with them. If you have any questions concerning a certain therapy, at any time, we ask that you please not reach out to our staff through social media or private outlets. Please do not ask our practitioners for their private numbers, emails, or addresses. All questions and/or concerns need to be handled directly through our office. This keeps relationships professional and HIPPA compliant. Our office is open Monday-Friday, 9am to 5pm MST. Our main office number is 208-359-2201 or you can text us at 208-970-6762 and we will reply as soon as possible.

By initialing below, I understand and have read BIMC's privacy policy and agree to it.

Initial: _____

After hours contact during Wellness Week: If you have something urgent to tell us after hours during Wellness Week, you can contact 208-970-6762. This is our work cell that one of the office staff will have, on their person, after hours during Wellness Week only. Text or call this number and they can relay the message to one of the providers. If it is an emergency please call 911.

By initialing below, I have read and understand who to contact if I have something urgent that needs to be taken care of.

Initial: _____

*** Our clinic consists of both natural and medical professionals. Therefore, not all providers are medically licensed to treat, prevent, cure, or diagnose. Our nurse practitioner Eric Brown is medically licensed and board certified. He will be the main provider managing your care after attending Wellness Week. It is recommended that you consult your medical practitioner before therapies and services begin. You have chosen to come on your own free will and choice.

Initial: _____

I certify that I have read, fully understand, and agree to the above information, the element of informed consent, my responsibilities and rights, and give my consent. I have been informed on each practice, procedure, or therapy and give informed consent to the therapists for their therapies. I also take full responsibility and am responsible for all liability, for loss, or injury that may occur while in any of the therapies participated in during the clinic week. I do not hold the therapists legally responsible. I take full responsibility for my own care after the clinic and am fully responsible for supplementation that I may choose to purchase of my own free will. I agree that this agreement shall be governed by, constructed, and enforced in the accordance with the laws and State of Idaho and

subject of the jurisdiction of the First Judicial District of the State of Idaho in and for Madison County. I also understand the financial responsibility for payment for the procedures and any protocol that I choose to follow. All procedures will be paid for in full before they are received, and any product protocols are required to be paid in full before they can be picked up. I give my informed consent to use each therapy recommended.

Name (Printed): _____ Date: _____

Signature: _____

Signature of Legal Guardian (If needed) : _____

Address: _____ City: _____

State: _____ Zip Code: _____

Phone Number: _____

Emergency Contact: _____

Emergency Contact Phone Number: _____

Beacon Integrative Medical Center Health History Form

Name (First, MI., Last): _____ DOB: _____

Allergies to Medications

Medication	Reaction

Current Medications (Include supplements and OTC medications)

Drug Name	Dose	How Often	Drug Name	Dose	How Often

Have you been previously diagnosed with any of the following:

Eyes

Cataracts Glaucoma
 Wears glasses/contacts

Ears

Hearing aids
 Ringing

Nose/Sinuses

Allergies Sinus infections

Cardiovascular

Aneurysm Angina DVT
 Dysrhythmia HTN Murmur
 Myocardial infarction
 Other heart disease
 (Explain): _____

Gastrointestinal

GERD Gallbladder disease
 Heartburn Hemorrhoids
 Hepatitis Hiatal hernia Ulcer

Endocrine

Goiter Hyperlipidemia
 Hypothyroidism Thyroid Disease
 Type I DM Type II DM

Respiratory

Asthma Bronchitis
 COPD Pneumonia

Genitourinary

Hernia Incontinence
 UTI(s)

Skin

Dermatitis Mole(s) Psoriasis
 Other skin condition(s)
 (Explain): _____

Musculoskeletal

Arthritis Gout Injury
 (Explain): _____

Neurological

Epilepsy Seizures
 Headaches, migraines Stroke TIA

Psychiatric

Depression Anxiety

Heme/Onc

Anemia Cancer
 (What type of cancer): _____

**Other
 Health
 History
 Not Listed:**

Hospitalizations and Surgeries with approximate dates:

Hospitalization/Surgery:	Date:

Pertinent Family History:

Goals While at Wellness Week:

Anything Else You Would Like Us To know?

Signature: _____ Date: _____

Beacon Integrative Medical Center

Patient Name (last): _____ (first): _____ (MI): _____

DOB: M _____ D _____ Yr _____

What name would you like to be called? _____ Sex: Male _____ Female _____

Street Address: _____ City, State, Zip _____

Mailing Address: _____ City, State, Zip _____

Email: _____

Cell phone: _____ Home phone: _____ Work Phone: _____

Preferred Method of Contact: Call _____ Text _____ Email _____

Marital Status: _____ Never Married _____ Married _____ Divorced _____ Separated

Ethnicity: _____ Hispanic or Latino _____ Not Hispanic or Latino _____ Declined

Race: _____ American Indian/Alaska Native _____ Asian _____ Black/African American

_____ White _____ Native Hawaiian/Pacific Islander _____ Declined

Emergency Contact: _____ Relationship: _____ Phone: _____

Mailing Address: _____ City, State, Zip _____

Financial Responsibility

I have requested services from Beacon Integrative Medical Center on behalf of myself and/or my dependents, and understand that by making this request, I am financially responsible for all charges incurred in the course of treatment. I further understand that fees are due on the date of service and I agree to pay all charges. Any account not paid in full within 90 days may be assessed fees and interest up to 12%.

Authorization to Release Information and Assignment of Insurance Benefits

I hereby authorize Beacon Integrative Medical Center to release any relevant information generated in the course of examination or treatment that is necessary to process insurance claims to insurance carriers.

I hereby assign all insurance benefits to which I am entitled for medical services provided to myself and/or my dependents by Beacon Integrative Medical Center to be issued directly to Beacon Integrative Medical Center. I understand that I am responsible for any amount not covered by insurance.

HIPPA-Privacy Policy

I have been offered a copy of Beacon Integrative Medical Centers privacy policy and have been given the right to read it in full before signing this form.

Patient/Responsible Party Signature

Date

Amniotic and Umbilical Cord Stem Cell Treatments (Mesenchymal Cells/Allograft Tissue)

The most revolutionary regenerative treatments now being offered at our office is the amniotic and umbilical stem cell (Mesenchymal) treatments. These are FDA regulated and contain growth factors, hyaluronic acid, cytokines and stem cells.

The amniotic and umbilical cord tissues are recovered from healthy live birth/c-section babies, whose mothers are consenting donors under the age of 35. These products have undergone extensive testing and screening to ensure safety and quality, including stringent donor selection criteria, infectious disease testing, and lot-release testing following standards delineated by the Food and Drug Administration (FDA) and the American Association of Tissue Banks (AATB). The FDA strictly regulates the process of how these tissues are acquired, tested, processed and stored to ensure the highest level of patient safety.

During a normal, scheduled birth, the amniotic fluid, placenta, umbilical cord and accompanying materials are normally discarded, but with Stem Cell collection these products have been donated by the mother, with the baby being fully developed, delivered, healthy, and happy. The materials are placed in a sterile container and quickly taken to the nearby FDA registered, certified laboratory.

The list of conditions that benefit from amniotic/umbilical stem cells is continuing to grow. With the way these are regulated by the FDA, they may be used for conditions where practitioners view them as safe and useful.

Mesenchymal Stem Cell or Allograft Therapies are now being used successfully for (but not limited to) **COPD, Kidney Disease, Stroke**, Alzheimer's, Autism, Parkinson's, **Heart Failure/ Heart Disease**, Erectile Dysfunction, **ALS, MS**, neuropathy, **Arthritis (All Types)**, Soft Tissue Conditions: Tendonitis, Bursitis, **Ligament Injury (e.g. Achilles, Knee, Rotator Cuff)**, Sports Injuries, **Neurologic Conditions**, Cerebral Palsy, Trigeminal Neuralgia, Migraines and Cluster Headaches, Musculoskeletal, Post Herpetic Neuralgia, RSD, Back Pain, **Diabetes, Lyme Disease**, Plantar Fasciitis, **Organ Failure, Autoimmune Conditions**, SI Joint Pain, Tennis/Golfers Elbow, Fibromyalgia, pelvic pain and more.

A considerable amount of research on Amniotic/Umbilical Cord products (Allograft Tissue/ Mesenchymal Stem Cells) has either been published in peer reviewed journals or presented at professional society meetings nationwide. New studies are added monthly to this work, and time after time this therapy has been shown to be safe.

Other forms of Stem Cells:

Bone marrow derived stem cell procedures require an aspiration from the patient's iliac crest (pelvis). Studies have shown a 29% incidence of chronic pain from the aspiration procedure along with potential for additional complications such as nerve/vessel injury, bowel perforation, fracture.

In addition, as one ages the quantity and quality of stem cells obtainable from the bone marrow drops exponentially. It is illegal in the US to culture one's bone marrow to amplify cell counts. At birth, 1 in 10,000 cells in one's bone marrow is a stem cell. This drops to 1 in 2 million by age 70. No matter how much one's bone marrow is concentrated, the cell counts are a problem.

Adipose derived stem cell procedures require a mini-liposuction from the abdomen or buttock. The first problem with this is that plenty of patients simply do NOT have significant adipose tissue to spare.

The second problem with adipose procedures is interesting. Adipose tissue contains VERY HIGH numbers of stem cells. However, once the adipose is processed and moved to your area of treatment, over 80% of them die within two days. So, they do not even get a chance to help!

Safe

Studies have shown that bone marrow aspiration procedures have a high incidence of complications. Twenty nine percent of patients end up with chronic pain, which is a real problem when the objective is to actually rid patients of pain. Can you imagine that conversation, "Hey doc my knee feels awesome but what did YOU DO TO MY HIP!"

Additional complications reported from bone marrow aspirations include infection, bleeding, nerve/vessel injury, bowel perforation, pelvic fracture.

The mini-liposuction procedure does not have a high incidence of complications. However, as mentioned, most of the stem cells from that procedure die within 48 hours. Real bummer.

On the other hand, all of these issues are avoided by not having to use a harvesting procedure.

In addition, the amniotic fluid does not have HLA (Human Leukocyte Antagens) factors in sufficient quantity to cause a rejection in the recipient. Also known as MHC factors, these are the cell components that would lead to a Graft versus Host reaction if they were present in sufficient concentrations. The amniotic fluid is immunologically privileged as a result.

The umbilical cord tissue/blood material could cause a rejection reaction if not treated properly. As an example, if one receives a blood transfusion from an incompatible donor the blood will be rejected with a potentially very serious reaction. To prevent that from happening, all red blood cells are removed from the umbilical cord blood. This removes the HLA factors and prevents the Graft versus Host reaction.

Consistent

Amniotic and umbilical materials are very consistent. When the processing occurs at first rate labs certified by the FDA, the number of cells is very high and extremely consistent. Unlike adipose and bone marrow, where the cell counts drop big time with aging and the quality of those cells diminishes as well.

One thing that should be noted is the MYTH that there are no live cells in processed amniotic fluid. The FDA does not require the material to be radiated, and if a low amount of preservative is used the cells survive the processing. In addition, cryopreservation does not kill cells. (If it did, egg donor programs

would go out of business.) So, labs that do not radiate and use minimal preservative get plenty of live cells!

Excellent Outcomes

There are too many studies to count looking at the effectiveness of Mesenchymal Cell tissue to treat musculoskeletal conditions. Pubmed.com is a great source of data and we have listed some excellent references at the bottom of this page.

It is improper for ANYONE to provide an unrealistic expectation of what these treatments can do. Using the words “heal” or “cure” is inappropriate and propagates distrust among clients. No study shows 100% effectiveness. More reasonable words to use are facilitate, mitigate, or improve. The biologic elements in these materials work together to repair damaged tissue and also facilitate one’s own body to assist in the process as well. Just how much improvement achieved will vary since people are **UNIQUE AND DIFFERENT!**

The father of modern stem cell therapy is Dr. Arnold Caplan, a researcher at Case Western Reserve University. His extensive work has shown that the regenerative materials used are predominantly acting as signals to one’s body, telling the body to “get to work” and repair itself. He recommends changing the abbreviation of MSC’s, which normally stands for Mesenchymal Stem Cells, to Medicinal Signaling Cells. The goal is to “more accurately reflect the fact that these cells home in on sites of injury or disease and secrete bioactive factors that are immunomodulatory and trophic (regenerative) meaning that these cells make therapeutic drugs in situ that are medicinal.”

He continues, “It is, indeed, the patient’s own site-specific and tissue-specific resident stem cells that construct the new tissue as stimulated by the bioactive factors secreted by the exogenously supplied MSCs.”

PRP

PRP stands for Platelet Rich Plasma and involves a simple blood draw from the client. The blood is then placed into a kit and spun in a centrifuge machine. This separates the blood into several layers.

The middle layer is termed the “buffy coat” and contains concentrated platelets, white blood cells, and 8-12 growth factors. There are minimal stem cells in PRP, if any, so it is a very helpful regenerative biologic but not a stem cell therapy.

PRP therapy takes the healthiest part of your immune cells and reintroduces them back into the body to help the body fight infection, repair degenerative tissue and stimulate your own immune system.

This therapy has been clinically proven to treat pain and stimulate healing in the body. This procedure includes injecting a high dose of platelets, from your own blood, into areas affected by pain. This is a safe and natural way for your body to accelerate the healing process, rather than blocking or masking your pain.

Regenerative therapy procedures reduce the necessity for major surgery by treating injured tissues before the damage progresses any further.

PRP is ideal for individuals who face ailments such as but not limited to back pain, knee arthritis, tendonitis, ligament injuries, arthritis of the knee, hip or shoulder rotator cuff tears, tennis elbow, hip bursitis, patellar tendon injury, plantar fasciitis, and Achilles tendon injuries.

FDA Regulations

Mesenchymal Cells are not regulated as drugs, rather they fall into the biologics category. These are regulated heavily by the FDA, but do not get approved or denied.

Here is how the FDA regulates things:

Medical devices – joint implants, screws/rods, DME, etc. In the world of regenerative medicine, this only applies to the kits used in PRP, bone marrow or adipose procedures.

Drugs – think of Lipitor, Vicodin, Viagra, etc. These are medications that have gone through a clinical trial and been approved for a specific indication.

Biologics – the FDA strictly regulates how biologic materials are acquired, processed, stored and used under the CFR Part 1271. Amniotic and umbilical materials fall under this category, which does not involve an Approval/Denial process like drugs do.

Specifically, the section under Part 1271 that applies to amniotic/umbilical tissues is Section 361 products, which are not required to be licensed or approved by the FDA and are regulated under Section 361 of the Public Health Service (PHS) Act.

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Dawson et al, Autologous Cord Blood Infusions Are Safe and Feasible in Young Children with Autism Spectrum Disorder: Results of a Single-Center Phase I Open-Label Trial, STEM CELLS TRANSLATIONAL MEDICINE 2017;6:1332–1339.

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Carbone et al, Human amnion-derived cells: prospects for the treatment of lung diseases. Curr Stem Cell Res Ther. 2014;9(4):297-305.

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Stavros P. Loukogeorgakis, MD, PhD, Stem cells from amniotic fluid e Potential for regenerative medicine, Best Practice & Research Clinical Obstetrics and Gynaecology 31 (2016) 45e57.

Chiang et al, Feasibility of Human Amniotic Fluid Derived Stem Cells in Alleviation of Neuropathic Pain in Chronic Constrictive Injury Nerve Model. PLoS One. 2016 Jul 21;11(7):e0159482. doi: 10.1371/journal.pone.0159482. eCollection 2016.

Vines et al, Cryopreserved Amniotic Suspension for the Treatment of Knee Osteoarthritis. J Knee Surg. 2016 Aug;29(6):443-50. doi: 10.1055/s-0035-1569481. Epub 2015 Dec 18.

Ramakrishna et al, Stem Cells and Regenerative Medicine – A Review, Annual Review & Research in Biology 1(4): 79-110, 2011.

Murphy et al, Amniotic Fluid and Placental Membranes, Semin Reprod Med. 2013;31(1):62-68..

<https://r3stemcell.com/stem-cells-treatments/umbilical-cord-stem-cell-therapy/>

Shroff, G. (2016). Transplantation of human embryonic stem cells in patients with multiple sclerosis and Lyme disease. American Journal of Case Reports, 17, 944-949.

Here are a few links for you to check out.

<https://multiplesclerosisnewstoday.com/2016/10/21/umbilical-cord-stem-cells-restore-immune-system-t-cell-control-in-early-multiple-sclerosis-study/>

<https://multiplesclerosisnewstoday.com/mesenchymal-stem-cell-msct-clinical-trials-in-ms>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4571454/>