

# **Informed Consent for Breast Therapy**

## *The RN Therapist—Revive Therapy*

***Breast Massage Therapy is available at Revive Therapy by a Registered Nurse with advanced training. Steve Metzger has certification for Lymph Drainage Therapy (Chikly Institute) and Breast Massage Therapy (Swedish Massage Institute in NYC.)***

**Description.** Professional and respectful touch on or near the breast tissue will only be therapeutic. Specific indications for your care will determine type of therapy and consent will always be required. Lymphatic drainage, myofascial release or other massage techniques may be utilized. Therapeutic work near the breasts may also require informed consent. **IMPORTANT: Any concern about a lump should be checked by your doctor.**

**Benefits and Indications.** Breast therapy may have many health benefits, including:

- *Reduction or elimination of breast pain*
- *Opening dense, fibrocystic, cystic and fibroadenoma breast tissue*
- *Surgical healing and scar therapy (implants, reductions, lumpectomy, mastectomy, explants)*
- *Improved posture, reduced stress, improved body image and released stored emotions*
- *Decreased breast cancer risk*

**Indications for Breast Therapy (Mark "X" for all that apply):**

- |   |  |
|---|--|
| <input type="checkbox"/> Breast Pain (Mastalgia, N64.4)         | <input type="checkbox"/> Large, Heavy Breasts (Hypertrophy, N62)             |
| <input type="checkbox"/> Dense or Fibrocystic Breasts (N60.1)   | <input type="checkbox"/> Breastfeeding, Lactation (N64.9)                    |
| <input type="checkbox"/> Posture Improvement or Correction      | <input type="checkbox"/> Lymph Node Surgery (Lymphadenectomy, Z48.3)         |
| <input type="checkbox"/> Decrease Risk of Breast Cancer (Z80.3) | <input type="checkbox"/> Surgery: Implants, Explants, Reconstruction (Z41.1) |
| <input type="checkbox"/> Lymphatic Drainage Therapy             | <input type="checkbox"/> Other _____   |

**Consent.** Breast therapy requires consent. Therapy can be declined or stopped at any time.

**Referral from Your Licensed Health Care Provider.** Breast therapy at Revive Therapy will be performed by a licensed registered nurse but you may be asked for a referral from your licensed healthcare provider.

**Chaperone and Referral.** Revive Therapy uses a male therapist, who is a registered nurse with advanced breast therapy skills and training. A chaperone is welcome and should be arranged in advance. Referral to a female therapist may be requested. **Chaperone declined but may be requested at any time.** \_\_\_\_\_ Initials

**Modesty, Privacy and Respect.** Your dignity will always be honored. Therapy will be customized to your comfort and needs. Please communicate any concerns and preferences for your therapy.

**Draping Options.** Breast therapy may be performed over loose clothing, linens, or with direct contact. Clarify your comfort and preferences with your therapist—appropriate draping will always be used\

**Abuse, PTSD and Emotions:** Discuss any relevant history or concerns with the therapist. Your safety is most important! Within your comfort, emotional healing may result through safe holistic bodywork.

- I have read, understand fully and consent to the breast therapy described above.*
- Breast therapy at Revive Therapy is performed by a licensed Registered Nurse.*
- I'm not under the influence of medications to sway my decision.*
- I also hold therapist and Revive Therapy harmless for non-physical injuries.*

**Patient's Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

NOTE: Form, expires in three years from signature

**Patient's Signature:** \_\_\_\_\_

**My goals, concerns or limitations:** \_\_\_\_\_

**Licensed Health Professional Signature:** \_\_\_\_\_