

COVID-19 Client Intake & Consent Form

As mandated by the California Public Health Department and locally, the Pasadena Public Health Department, strict protocols are now implemented for Massage Therapy/Energy Medicine/Bowenwork services. Please carefully read the entirety of this intake form and answer all questions. These protocols are for your health and safety, as well as the health and safety of others. This form must be filled out prior to your scheduled appointment, and will be updated prior to each session.

1. Have you been tested for COVID-19? If so, when? What was the result?
2. In the last 14 days:
 - a. Have you been in contact with anyone who has been diagnosed with COVID-19 or has had coronavirus-type symptoms?
 - b. Have you been asked to self-isolate or quarantine by a doctor or local public health official?
 - c. Have you been somewhere with a high infection rate?
3. Do you now, or have you recently experienced any of the following as a NEW PATTERN since the beginning of the pandemic:
 - a. Fever
 - b. Chills
 - c. Shortness of breath
 - d. Cough
 - e. Sore throat
 - f. Nasal, sinus congestion
 - g. Loss of sense of taste or smell
 - h. Persistent chest pain or pressure
 - i. Diarrhea, digestive upset
 - j. Skin marks, lesions, rashes
 - k. Fatigue
 - l. Sudden onset of muscle soreness (not related to a specific activity)
 - m. Discomfort with exertion or exercise
 - n. Headache
 - o. Nausea or vomiting
4. If you tested positive for COVID-19 or believe you may have had COVID-19, but were not tested:
 - a. Has your medical doctor cleared you to return to work or to end self-isolation?
 - b. Has your medical doctor advised you to return to normal activity levels?

- c. Are you taking any drugs to manage blood clotting?
 - d. What other long-term, post-infection complications continue to affect your life?
5. Do you have any pre-existing conditions that increase your risk of contracting COVID-19?

If you are positive for COVID-19 or have experienced COVID-19 symptoms (listed above) within the last 14 days, your appointment will need to be canceled. A negative COVID-19 test will be required in order to reschedule.

Please be advised, as mandated by the California and Pasadena Public Health Departments, **a mask must be worn at all times from entering the premises, throughout your session, until leaving the premises, no exceptions.** An effective mask should fit securely around your mouth and nose. In addition, your practitioner will also be required to wear a mask throughout your session.

“I understand and give consent to have my temperature taken by my practitioner, with a touchless thermometer prior to receiving bodywork.”

“I understand that close contact with people increases the risk of infection from COVID-19. By signing this form, I acknowledge that I am aware of the risks involved and give consent to receive massage and bodywork from this practitioner (Nadine Nolan).”

“I understand that my name and contact information might be shared with the state health department in the event that a client or practitioner at this facility tests positive for COVID-19. My contact details will only be shared in the event they are relevant based on suspected exposure date, and only for appropriate follow-up by the health department.”

Signature

Date