

INFORMED CONSENT – WEIGHT LOSS TREATMENT

This consent form is inclusive of weight loss treatment involving SEMAGLUTIDE Injections

Informed Consent Instructions: This is an informed consent document to provide written information about the above named treatment risks, benefits and alternatives. It is important that you understand the information provided to you prior to proceeding with this treatment, please ask your healthcare professional any and all questions prior to signing this informed consent.

I authorize Harmony Weight Loss, LLC to administer elective SEMAGLUTIDE Injections for the intended purpose of managing an individual's weight loss or to control diabetes at my request. I understand Harmony Weight Loss, LLC is treating my subjective symptoms and is not providing a medical-related diagnosis or medical treatment plan.

Purpose of Treatment and General Information:

Harmony Weight Loss, LLC is providing SEMAGLUTIDE Injections to patients to reduce the risk of stroke, heart attack, and weight loss. This medication is recommended for weight loss in overweight adults who may also have high blood pressure, diabetes, or high cholesterol.

What to Expect During Treatment: Your treatment provider will begin treatment by completing a consultation to assess your individual needs and any contradictions you may have to your desired treatment. To reduce your risks of side effects, your doctor may direct you to start this medication at a low dose and gradually increase your dose. After receiving SEMAGLUTIDE Injections patients may feel tired, nausea, vomiting, diarrhea, or constipation.

I understand the treatment goal is to reduce patient's weight and that there is no implied or stated guarantee of success or effectiveness of any treatment.

Treatment Benefits:

SEMAGLUTIDE Injections therapy benefits may include:

- Weight Loss
- May Reduce High Blood Pressure
- May decrease chances of having a heart attack, stroke or other diabetes-related complications such as kidney failure, nerve damage or eye problems.

Possible Risks and Side Effects:

The possible side effects and risks of SEMAGLUTIDE Injections Therapy include, but are not limited to:

Swelling/redness/itching at the injection site, tiredness, nausea, vomiting, diarrhea, or constipation may occur. Nausea usually lessens as you continue to use semaglutide. If any of these effects last or get worse, tell your doctor promptly.

Remember that this medication has been prescribed because your doctor has judged that the benefit to you is greater than the risk of side effects. Many people using this medication do not have serious side effects.

Tell your doctor right away if you have any serious side effects, including: signs of kidney problems (such as change in the amount of urine), vision changes (such as decreased/blurred vision).

Get medical help right away if you have any very serious side effects, including: signs of pancreas or gallbladder disease (such as nausea/vomiting that doesn't stop, severe stomach/abdominal pain).

Although semaglutide by itself usually does not cause low blood sugar (hypoglycemia), low blood sugar may occur if this drug is prescribed with other diabetes medications. Talk with your doctor or pharmacist about whether the dose(s) of your other diabetes medication(s) needs to be lowered. Drinking large quantities of alcohol, not getting enough calories from food, or doing unusually heavy exercise may also lead to low blood sugar. Symptoms may include sudden sweating, shaking, fast heartbeat, hunger, blurred vision, dizziness, headache, or tingling hands/feet. It is a good habit to carry glucose tablets or gel to treat low blood sugar. If you don't have these reliable forms of glucose, rapidly raise your blood sugar by eating a quick source of sugar such as table sugar, honey, candy, or drinking a glass of fruit juice or non-diet soda. Check with your doctor or pharmacist to find out what you should do if you miss a meal.

Symptoms of high blood sugar (hyperglycemia) include increased thirst/urination. If these symptoms occur, tell your doctor right away. Your dosage may need to be increased.

A very serious allergic reaction to this drug is rare. However, get medical help right away if you notice any symptoms of a serious allergic reaction, including: rash, itching/swelling (especially of the face/tongue/throat), severe dizziness, trouble breathing.

This is not a complete list of possible side effects. If you notice other effects not listed above, contact your doctor or pharmacist.

This list is not meant to be inclusive of all possible risks associated with SEMAGLUTIDE Injections Therapy, as there are both known and unknown side effects associated with any medication or procedure.

I have read and understand possible risk, side effects, and complications.

Who Should Not Take Semaglutide:

- Diabetic Retinopathy
- Low blood sugar
- Gall bladder disease
- Acute inflammation of the pancreas
- Decreased kidney function
- Medullary thyroid cancer

- Multiple endocrine neoplasia type 2
- Family history of medullary thyroid carcinoma
- Kidney disease with decreased kidney function

I have read and understand the above stated conditions may be contraindications for this treatment. I agree to disclose if I meet any of the above criteria and discuss treatment options with my provider.

Possible Interactions:

Beta-blocker medications (such as metoprolol, propranolol, glaucoma eye drops such as timolol) may prevent the fast/pounding heartbeat you would usually feel when your blood sugar falls too low (hypoglycemia).

I have read and understand possibility of interactions with treatment.

Financial Responsibility:

I understand the regular charge applies to all subsequent treatments. I understand and agree that all services rendered to me are charged directly to me and that I am personally responsible for payment. I further agree in the event of non-payment, to bear the cost of collection and/or Court costs, fees and reasonable legal fees, should this be required.

I have read and understand I am financially responsible for services rendered.

Disclosure of Health History/Medications/Substance Abuse Use:

I agree to inform the staff of any know allergies to medications, foods and/or other substances and have disclosed any previous allergic reactions. I further agree to inform staff of any/all medications/substances I am currently taking, including recreational or street drugs, and have disclosed all pertinent health history. I understand that failing to inform the staff about my medical issues and/or drug use can lead to serious complications.

I have disclosed all medication, allergy, and health history to staff.

Consent:

By signing below, I acknowledge and agree:

- I have fully disclose on my client intake form any medications, previous complications, planned or previous surgeries, sensitivities, allergies, or current conditions that may affect my treatment.
- I have read the foregoing informed consent for SEMAGLUTIDE Injections Therapy and agree to the treatment with its associated risks.
- I acknowledge that no guarantee has been given by anyone as to the results that may be obtained.
- I have received and will follow all aftercare instructions as it is crucial to do so for good healing and to minimize the risk of complications.

- I hereby consent to perform this, and all subsequent SEMAGLUTIDE Injections Therapy, with the above understood. I hereby release the physician, the health care provider performing SEMAGLUTIDE Injections Therapy, the clinic facility from liability associated with this procedure.
- It has been explained to me in a way that I understand:
 - The above treatment or procedure undertaken.
 - There may be alternative procedures or methods of treatment.
 - There are risks, known and unknown, to the procedure or treatment proposed.