# KETAMIN PATIENT CONSENT FORM

Before you decide to take part in Ketamine Assisted Services, you need to know why it is being done and what it will involve. This includes any potential risks to you, as well as any potential benefits you might receive. Read the information below closely and discuss it with family and friends as you wish. Ask your providers at Symmetry Counseling if there is anything that needs to be clarified, or if you would like more details. Take your time to decide. If you do decide to take part, your signature on this consent form will show that you received all of the information below and that you were able to discuss any questions and concerns you had before treatment.

#### 1. APPROVAL – KETAMINE FDA

Ketamine is approved by the FDA for anesthesia, and sedation during medical procedures. Since its approval in 1970, it has been widely used in operating rooms and emergency departments. Ketamine's use for the treatment of depression, anxiety, chronic pain, OCD, or drug or alcohol abuse is off-label and has not been approved by the FDA.

I acknowledge that ketamine is not FDA-approved for psychiatric treatment or other life events I am seeking support for.

## 2. VOLUNTARY NATURE OF THE TREATMENT

I acknowledge that my taking part in this procedure is my choice and that I may decide not to take part or to withdraw from the procedure at any time.

#### 3. WITHDRAWAL OF TREATMENT

I acknowledge that the medical practitioner may stop the treatment without my consent or administer a sedative if my behavior requires it.

#### 4. PROCEDURE – KETAMINE Administration

There are four potential ways ketamine will be administered or overseen at Symmetry Counseling.

- A. Through an intravenous line (IV) started in an extremity (arm or hand)
- B. Through an intramuscular (IM) injection
- C. Through a self-administered nasal spray
- D. Through a self-administered oral troche or lozenge which dissolves under your tongue.

Before any administration in the office, the following vital signs will be taken: blood pressure, pulse and oxygen saturation, temperature. This will all be done under the supervision of our medical director.

The duration of any of the treatments should vary from 40 to 55 minutes. Depending upon your response to the first treatment, we may increase the dose incrementally with your subsequent treatments to maximize your response.

- I acknowledge all the information about the treatment administration listed above.
- I acknowledge that adjacent medications may also be administered if necessary, such as anti-nausea medication, mild sedatives for agitation, etc.
- I have had an opportunity to ask the nurse practitioner any questions about this treatment, and they have answered those questions to my satisfaction.

## 5. RISKS/SIDE EFFECTS - KETAMINE

Side effects normally depend on the dose and how ketamine is given. The dose being used for this purpose is generally lower than anesthetic doses. Side effects often go away on their own.

Common side effects, greater than 1%, and less than 10%:

- hallucinations
- vivid dreams and nightmares
- nausea and vomiting
- increased saliva production
- dizziness
- blurred vision
- increased heart rate and blood pressure during the infusion
- out of-body experience during the infusion
- change in motor skills

If they are severe, another medication such as a sedative can be used to treat the symptoms. Ketamine has a very short half-life, and most side effects should dissipate within 24 hours or less.

Uncommon side effects, greater than 0.1%, and less than 1%:

- rash
- double vision

- pain and redness in the injection site
- Increased pressure in the eye
- jerky arm movements resembling a seizure

# Rare side effects, greater than 0.01%, and less than 0.1%:

- allergic reaction
- irregular or slow heart rate
- arrhythmia
- · low blood pressure
- cystitis of the bladder: inflammation, ulcers, and fibrosis
- Even more severe side effects up to and including death are possible, but extremely unlikely, such as a fatal allergic reaction to one of the medications.

## Other Risks:

- Ketamine can cause various symptoms including but not limited to flashbacks, hallucinations, feelings of unhappiness, restlessness, anxiety, insomnia, and disorientation.
- The uncommon risk of a dosing error, or unknown drug interaction that may require medical intervention including intubation (putting in a breathing tube), or hospitalization.
- Risk of other medications interacting with ketamine. You must disclose all medications (both prescription and over-the-counter) and supplements that you are taking.
- Ketamine may not help your depression, bipolar disorder, PTSD, anxiety, other mental health conditions, or chronic pain syndrome.
  - I acknowledge that ketamine therapy may not help my anxiety, depression, bipolar, PTSD, or any other psychiatric disorder. No guarantees or assurances have been made or given to me about the results that may be obtained.
  - The nature/possible risks and side effects of a ketamine treatment have been fully explained to me. The possible alternative methods of treatment, the risks involved, and the possibility of complications have been fully explained to me.

#### 6. BENEFITS - KETAMINE

Unlike conventional anti-depressants, ketamine has been associated with a rapid decrease in depression, bipolar, and PTSD symptoms. It has also been shown to be helpful with a variety of chronic pain syndromes, and with alleviating the cravings for drugs and alcohol. There are many other conditions for which ketamine has been found useful (i.e. eating disorders, anxiety, OCD, managing difficult life events). The initial series of infusions is used to prolong the longevity of improvement. While the goal is an improvement of symptoms, results cannot be guaranteed, and there is no way to predict

how any individual will respond to ketamine. These effects may not be long-lasting and will most likely require further treatments.

- I acknowledge that there are many potential benefits to the use of ketamine for psychiatric conditions, chronic pain, and difficult life events, while also understanding that no results can be guaranteed.

#### 7. OTHER TX OPTIONS

Ketamine is not the only option for patients with treatment-resistant depression. There are other alternatives, including electroconvulsive shock therapy (ECT) and transcranial magnetic stimulation (TMS). Ketamine is not the only option for patients with chronic pain. Other alternatives include pain medicines, anticonvulsants, physical therapy, cognitive-behavioral therapy, steroid injections, spinal pumps, spinal cord stimulation, and surgery. Ketamine is also not the only option for alcohol and drug abuse.

 I acknowledge other treatments outside of Ketamine can address the symptoms I am dealing with.

## 8. EXPERIENCE DURING SESSION

- I acknowledge that I may have a difficult or uncomfortable mental and/or physical experience, (a "bad trip"). I understand that the therapist, coach, or guide present will share pre-consented reassurances if this is to happen.
- I acknowledge that there may be background noise during my session. Music will be provided as part of my intentional backdrop.
- I acknowledge that I have access to the treatment room for 2 hours. If I need to stay longer, I allow myself to be moved to a safe, quiet area (applicable only during office hours.)
- I acknowledge that a safe, supportive environment to process will be provided during and after the procedure. Depending on the services I am seeking, this may include talk therapy, coaching or guided integration.
- For my safety, I acknowledge that all ketamine sessions will either have two providers present or will be recorded via HIPAA confidentiality standards.

#### 9. SELF-CARE BEFORE KETAMINE

- I acknowledge that I have not eaten in the last 4 hours.
- I acknowledge that I have not consumed any alcohol or illicit drugs at least 24

- hours before ketamine administration
- I have notified the treatment team of any external or internal situations that may interfere with treatment (medication changes, significant life events, changes in health and/or health conditions, etc.).
- I have notified my doctor/psychiatrist/therapist that I am receiving ketamine treatment

## 10. SHORT TERM AFTER-CARE

- I acknowledge that, if receiving treatment in person, I will not drive or operate heavy machinery for the remainder of the day, and I have coordinated a ride. I acknowledge that treatment will be rescheduled if I don't have a ride.
- I understand I must check out with a staff member before leaving my ketamine session.
- I understand that, depending on how my body metabolizes medication, I may experience effects of ketamine for a period of time after the official session is over.

# 11. LONGER TERM AFTER-CARE

Your ketamine treatment is meant to augment (add on to, not be used in place of) a comprehensive treatment plan. We advise you to be under the care of a qualified mental health professional (or an internal medicine, family physician or psychiatric nurse practitioner with experience and skill in treating psychiatric illnesses) while receiving ketamine treatment, and for the duration of your psychiatric symptoms.

Aftercare Day of Treatment Ketamine treatment is a deep, oftentimes emotional process. It is common to experience emotional and physical fatigue following a session. You may notice a change in emotional/mental states following treatments. We recommend seeing a therapist or life coach while you are working with ketamine. This can help you bring insight and clarity to what has come up for you during or after your sessions. Our team has trained therapists, coaches, or guides for exactly this purpose.

- I acknowledge that ketamine is not a standalone treatment. I know that I am
  personally responsible for additional modalities and treatments if I feel they are
  necessary.
- I acknowledge all relevant medical and mental health providers have been

notified about my seeking ketamine-assisted services.

# 12. SPECIAL NOTE ON SUICIDAL IDEATION

Psychiatric illnesses (especially, depression), chronic pain, and addictions carry the risk of suicidal ideation (thoughts of ending one's life). Any such thoughts you may have now, at any time during the weeks of your ketamine treatment, or at any point in the future, which cannot immediately be addressed by visiting with a mental health professional, should have you seek emergency care at an ER or to call 911.

- I agree to seek emergency services when needed.

Please remember that our support does not end when you leave your appointment. We are available to assist you before, during, and after your treatment course. You will receive a follow-up call or text message within 72 hours of your initial appointment, questions and concerns can be addressed at this time.

If you wish to receive further support or address questions and concerns, feel free to contact us at 1-208-391-7804 by text or phone call. You will be connected with the appropriate staff depending on the nature of your request. All calls and texts will be returned during business hours within 24 hours. If you are experiencing an emergency please call 911 or 988. Symmetry Counseling does not provide emergency services.

By signing below, I agree to all of the terms on this consent form.

Patient Consent:(to be signed in secure patient portal)