



Integrative Life Solutions Thermography Service
2511 Neudorf Road, Suite G, Clemmons, NC 27012 (336) 778-1950

Thermal Image Authorization and Release Form

Please print legibly.

Date: _____

Full Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Tel. (Res.) _____ Tel. (Bus) _____ Tel. (Mobile) _____

Email: _____ Date of Birth: _____

Emergency Contact Person _____

Emergency Contact Phone(s) _____

Referred by: _____

Infrared imaging is a non-contact, non-invasive, non-radiological method to detect thermal (heat) patterns that may be present in your body, particularly at the surface. A qualified thermography practitioner can interpret the information from the thermal images to detect possible abnormalities or physiological issues. Thermal patterns may be indicative of a neoplastic, infective, vascular, neurological, muscular or other problem. The information provided by the infrared images is combined with your health history to enable your primary healthcare provider to plan an approach for your care.

Infrared imaging it is not a stand-alone diagnostic test and does not replace—or discourage you from obtaining clinical findings from—mammography or other types of diagnostic examinations or imaging modalities.

I have read the above information and understand that I am not receiving a diagnosis of any condition based solely on my thermal scan. I fully understand that Integrative Life Solutions Inc. (ISLI), and its subsidiaries, suppliers, agents or employees, accepts no responsibility and has no liability in the event that I choose to self-administer or apply information given to me by an ISLI practitioner or representative about the thermal scan to any health condition I may have.

Print your full name: _____

Sign your full name: _____

Date: _____

Signature of thermography technician: _____

I (client signature) _____ authorize Integrative Life Solutions Thermography Service to release information regarding my scans or to send scan copies to the following physicians:

1. _____

2. _____