

Contact Information:

Name: _____ Date: _____
D.O.B. _____

Mailing address (inc zip) _____

PH #'s: Home (____) _____ Cell (____) _____ Work (____) _____

Current Clients: is this a new address? Yes / No Are these new ph#'s? Yes / No

EMAIL: _____ May I send you an e-newsletter? YES / NO

General Information:

Have you ever had an Infra Red Sauna Session before? YES / NO

If yes, when was your last session? _____ Where? _____

What are your reasons for wanting a session today? _____

Medications: _____

Allergies: _____

Supplements: _____

Do you: coffee / tea / soda / dairy / meat / grains / sugar / fried food / fast food / alcohol / tobacco / drugs

Current weight: _____ Water consumed in last 24 hours: _____ oz typical? : _____

Are you under any kind of Dr.'s care? Yes / No If yes, please list physician's and treatments: _____

Contraindications:

Infrared Saunas are not suitable for everyone, If you have the following conditions, we recommend that you do not use the Infrared Sauna. If you have any other concerns regarding the use of the sauna for health reasons, we recommend that you consult your doctor.

DO NOT attempt to self-treat any disease with an Infrared Sauna without direct supervision of a certified physician. If you have a disease, be certain to consult with your primary-care physician before using an Infrared Sauna. In all situations, hydration is a requirement for sauna use. Drinking advanced electrolyte replacement water is recommended before and after sauna use.

Medications: Individuals who are using prescription drugs should seek the advice of their personal physician or a pharmacist for possible changes in the drugs effect when the body is exposed to Far infrared waves or elevated body temperature. Diuretics, barbiturates and beta-blockers may impair the body's natural heat loss mechanisms. Some over the counter drugs such as antihistamines may also cause the body to be more prone to heat stroke.

Children: The core body temperature of children rises much faster than adults. This occurs due to a higher metabolic rate per body mass, limited circulatory adaptation to increased cardiac demands and the inability to regulate body temperature by sweating. Consult with the child's Pediatrician before using the sauna.

The Elderly: The ability to maintain core body temperature decreases with age. This is primarily due to circulatory conditions and decreased sweat gland function. The body must be able to activate its natural cooling processes in order to maintain core body temperature.

Cardiovascular Conditions: Individuals with cardiovascular conditions or problems (hypertension / hypo tension), congestive heart failure, impaired coronary circulation or those who are taking medications, which might affect blood pressure, should exercise extreme caution when exposed to prolonged heat. Heat stress increases cardiac output, blood flow, in an effort to transfer internal body heat to the outside environment via the skin (perspiration) and respiratory system. This takes place primarily due to major changes in the heart rate, which has the potential to increase by thirty (30) beats per minute for each degree increase in core body temperature.

Alcohol / Alcohol Abuse: Contrary to popular belief, it is not advisable to attempt to “Sweat Out” a hangover. Alcohol intoxication decreases a person’s judgment; therefore they may not realize it when the body has a negative reaction to high heat. Alcohol also increases the heart rate, which may be further increased by heat stress.

Chronic Conditions / Diseases Associated With A Reduced Ability To Sweat Or Perspire: Parkinson’s, Multiple Sclerosis, Central Nervous System Tumors and Diabetes with Neuropathy are conditions that are associated with impaired sweating. Hemophiliacs / Individuals Prone To Bleeding The use of Infrared should be avoided by anyone who is predisposed to bleeding.

Fever: An individual that has a fever should not use the Solo™ or any other type of sauna.

Insensitivity to Heat: An individual that has insensitivity to heat should not use the Solo™ or any other type of sauna.

Pregnancy: Pregnant women should consult a physician before using the Solo™ or any other type of sauna because fetal damage can occur with a certain elevated body temperature.

Menstruation: Heating of the low back area of women during the menstrual period may temporarily increase their menstrual flow. Some women endure this process to gain the pain relief commonly associated with their cycle whereas others simply choose to avoid sauna use during that time of the month.

Joint Injury: If you have a recent (acute) joint injury, it should not be heated for the first 48 hours after an injury or until the hot and swollen symptoms subside. If you have a joint or joints that are chronically hot and swollen, these joints may respond poorly to vigorous heating of any kind. Vigorous heating is strictly contraindicated in cases of enclosed infections be they dental, in joints or in any other tissues.

Implants: Metal pins, rods, artificial joints or any other surgical implants generally reflect Far infrared waves and thus are not heated by this system, nevertheless you should consult your surgeon prior to using an Infrared Sauna. Certainly, the usage of an Infrared Sauna must be discontinued if you experience pain near any such implants. Silicone does absorb Far infrared energy. Implanted silicone or silicone prostheses for nose or ear replacement may be warmed by the Far infrared waves. Since silicone melts at over 200°C (392°F), it should not be adversely affected by the usage of an Infrared Sauna. It is still advised that you check with your surgeon and possibly a representative from the implant manufacturer to be certain.

Pacemaker / Defibrillator: The magnets used to assemble our units can interrupt the pacing and inhibit the output of pacemakers. Please discuss with your doctor the possible risks this may cause.

I, _____, have read and understand this information. By signing this form I am stating that, to the best of my knowledge at the time of the signing, I do not have any of the above listed contraindications. In the rare event that I might experience pain and/or discomfort, I promise to immediately discontinue sauna use.

Signature of Client

Date of Signature

Signature of Foot Attendant

Date of Signature