

# LIVING WELL WITH CANCER

## Disclosure/Informed Consent

As your cancer coach, my approach is to educate you with the most current options in strategies for your health and wellbeing. My philosophy is to offer you the support needed to assist in using these methods for optimizing your health while on your journey to **Living Well with Cancer**.

Although I am a Board-Certified Family Nurse Practitioner, I will not be practicing in this capacity. I will not diagnose, assess, or give recommendations for treatment. I do not claim to cure cancer.

I encourage you to share with your oncologist any of the strategies we discuss. I am available to work as part of your health care team by contacting, (with your permission), any physicians and other health care providers you are currently working with to discuss your care. The education provided should not in any way replace your current treatment plan, it is meant only as a complement to that plan.

By signing this form, it constitutes agreement of above stated and payment for services.

Please indicate that you have read and understand the information on this form by providing your signature below.

Name (Print) \_\_\_\_\_

Date \_\_\_\_\_

Name (Signature) \_\_\_\_\_

