

INFORMED CONSENT FORM

On the Use of The "Autonomic Response Test" for Analysis and Treatment

I, _____, hereby authorize the use of the "Autonomic Response Test," also known as Applied Kinesiology and/or muscle testing, upon myself or my ward, _____, by Dr. Gale Keppel. The "Autonomic Response Test," hereafter known as ART, is explained as a simple, non-invasive, safe and quick analytical method gradually developed in the United States since the early 1970's, and has been actively used by some healthcare providers and physicians in the USA, Australia, Germany, Belgium, England, Japan, China, Korea, and Venezuela since the early 1980's. However, it is not widely known to a majority of physicians, dentists, and chiropractors in the USA. Using the test, it is possible to make a systematic analysis without knowing the chief complaint or history of the patient; however, this information is helpful. It has the following potential adverse psychological impacts, potential adverse effects, and potential benefits.

Potential Adverse Psychological Impact: 1) Because of the high sensitivity of this test, standard laboratory tests may fail to confirm the Autonomic Response Test results until the symptoms, imbalances or diseases further advance. This may give the impression of a "misdiagnosis" and create a psychological conflict for the patient. 2) The results of this test may contain unpleasant or unexpected information, and some people may suffer mental distress from such information. 3) The selection of a nutritional supplement, herbal or homeopathic remedy, and its optimal time duration as suggested by ART, may be different from standard textbook advice. In addition, prolonged use of the optimal remedy may be required.

Potential Adverse Effects: Just like any established medical diagnostic method, with ART there is a possibility of false positive or false negative results for unforeseen reasons.

Potential Beneficial Effects: 1) Because of the high sensitivity of this test, many conditions can be detected in their very early stages, and suitable treatment can be initiated, often at a great savings of time, money, and discomfort. 2) The possibility of microorganisms can be suggested. 3) The method is completely non-invasive, simple, safe, and painless, unlike most known standard methods. It can be performed almost anywhere, as it does not depend on expensive bulky instruments. 4) Therapeutic benefit of most treatments can be quickly, safely, and economically evaluated. 5) Without knowing the chief complaint or history of the patient, various imbalances in different parts of the body can often be systematically detected. 6) Through the use of ART, one can select an optimal remedy for treatment of a specific problem or affected body part, and/or detect a toxic food or drug prior to its ingestion. 7) The effect on the body or a body part, of a belief or thought, whether congruent or non-congruent, can be detected.

Because of the high sensitivity of ART, standard test results may fail to confirm ART results; however, the practitioner performing the test has an ethical responsibility to inform the patient/client of possible abnormalities of the body system as well as the corresponding organs, infections which may exist, and their possible consequences, as well as possible treatment as indicated by ART results. The examining practitioner must leave entirely up to the patient the choice of whether or not to act based on the ART results. The practitioner will refer the patient/client to an appropriate physician for medical and/or dental procedures.

The procedure of ART consists of testing a strong and "testable" muscle located either in the patient/client's body or that of a surrogate. Research has shown a small branch of some sympathetic nerve innervates the intrafusal fiber of each muscle spindle, part of every skeletal muscle. An Autonomic Response Test is indicated by a change in muscle strength while an area of the body, accupoint, substance, function, or thought is being tested.

Although I (person named above) understand that this test is not widely known by the medical community, the method and procedure have been explained in detail, and all my questions on this method and alternative methods have been answered. I therefore authorize Dr. Gale Keppel to make an analysis and suggest treatment based on this test. Since this procedure was authorized by my free will, I am free to withdraw at any time from future test and treatment. I will not hold liable the practitioner, clinic, or location where such a procedure was performed concerning consequences of ART results or treatment.

Signature of Patient or Guardian _____ Signature of Witness _____ Date _____

Please print patient name here: _____