



Blood Sugar Disclosure

This letter is to inform you that your blood sugar could drop considerable in the Hyperbaric Chamber. By signing this form you are fully aware that this could happen and that you will make sure to have some form of sugar before and after your treatments. It will be your responsibility to monitor your blood sugar. If you feel dizzy at anytime please tell us immediately. We carry Glucose Tablet and juice on the premises.

Furthermore, if you are driving a vehicle we will test your blood sugar before you leave. We would like for it to be 95 or higher before you drive. If you choose not to have your blood sugar tested, then you take full responsibility any consequence from low blood sugar.

Please sign below:

Patient Name or Guardian for Patient

Date