ORTHORITY 360™
TOTAL BODY WELLNESS

SEMAGLUTIDE CONSENT FORM

Semaglutide is an injectable GLP-1 prescription medication that is being prescribed for weight loss purposes. I understand this medication may be prescribed off-label at the discretion of the ordering provider to assist in weight loss measures.

- I understand that my weight loss is very subjective and highly dependent on the efforts of the client. For long-term success I understand the treatment needs to be combined with necessary lifestyle changes including healthy diet, regular exercise, and adequate sleep.
- I understand that I have the right to be informed of the procedure, any feasible alternative options, and the risks and benefits.
- Since every individual is unique, I understand ORTHORITY**360** cannot guarantee any specific result from Semaglutide.
- I understand it is essential to follow up in-office as directed throughout the treatment program, and self-administer the medication at home, at the dose directed.
- I understand ORTHORITY**360** does not replace lost or stolen medications. I understand that additional weight loss efforts and/or continued Semaglutide use may be indicated after the course of 10 weeks to reach my goal, and that if additional medication is needed it will be at an additional cost.

HEALTH CONCERNS If you suffer from a chronic medical or pathological condition, it is your responsibility to consult with an appropriate healthcare provider such as your Primary Care Provider or Specialist and inform them of your use of Semaglutide for weight loss. If you are using medications of any kind, you are required to alert us.

If you have any physical or emotional reaction to Semaglutide treatment, discontinue use immediately, and contact your PRACTITIONER to ascertain if the reaction is adverse or an indication of the natural course of the body's adjustment to the treatment.

Laboratory testing may be done to any patient identified at risk to determine areas of dysfunction, not to diagnose or treat. Potential blood tests: Full blood count, Liver function test, kidney function tests, cholesterol levels, HbA1c, glucose.

Patient groups who may require blood test monitoring at the discretion of the provider: age 50 or above, high blood pressure, pre-diabetics, any significant medical problem

COMMUNICATION Every client is an individual, and it is not possible to determine in advance how your system will react to the treatment. It is sometimes necessary to adjust your program as we proceed. It is your responsibility to do your part by following healthy dietary guidelines, exercising your body and making necessary behavioral modifications.

Alternatives to Semaglutide therapy are surgical procedures, other oral medical treatments and / or dietary and lifestyle changes alone. Several weeks to months of treatment may be required depending on your individual response. If a missed dose is more than 5 days late, the missed dose should not be taken, and the next dose should be taken at the normal time. It is essential to combine eating, exercise and behavioral modifications with Semaglutide. Semaglutide should not be used in combination with another GLP-1 receptor agonist, insulin or insulin secretagogues (such as sulfonylureas) due to the risk of hypoglycemia. Upon initiation of Semaglutide treatment in patients on warfarin or other coumarin derivatives, more frequent monitoring of International Normalized Ratio (INR) is recommended. Semaglutide causes a delay of gastric emptying and has the potential to impact the absorption of concomitantly administered oral medications. Monitor for potential consequences of delayed absorption of oral medications concomitantly administered with Semaglutide.

There are warnings and precautions for use of Semaglutide including warnings on pancreatitis, cholelithiasis and cholecystitis, thyroid disease, heart rate, dehydration and hypoglycemia, particularly for people with type 2 diabetes.

Thyroid adverse events, such as goiter have been reported in particular in patients with pre-existing thyroid disease. Semaglutide should therefore be used with caution in patients with thyroid disease.

A higher rate of cholelithiasis and cholecystitis (gallstone and gallbladder disease) has been observed in patients treated with Semaglutide.

Cholelithiasis and cholecystitis may lead to hospitalization and cholecystectomy (surgery to remove the gallbladder patients should be aware of the characteristic symptoms of cholelithiasis and cholecystitis.

Signs and symptoms of dehydration, including renal impairment and acute renal failure, have been reported in patients treated with Semaglutide.

Patients treated with Semaglutide should be advised of the potential risk of dehydration in relation to gastrointestinal side effects and take precautions to avoid fluid depletion. Patients should also be aware of the symptoms of increased heart rate.

Acute pancreatitis has been observed with the use of Semaglutide. If signs or symptoms of acute pancreatitis are experienced, patients should seek further evaluation by their Primary Care Provider, or at the local Emergency Department. If pancreatitis is suspected, Semaglutide should be discontinued; if acute pancreatitis is confirmed, Semaglutide should not be restarted.

Semaglutide may cause dose-dependent and Treatment-duration-dependent thyroid C-cell tumors at clinically relevant exposures in both genders of rats and mice. It is unknown whether Ozempic causes thyroid C-cell tumors, including medullary thyroid carcinoma (cancer, MTC), in humans, as the human relevance of Semaglutide-induced rodent thyroid C-cell tumors has not been determined. Patients should be aware of symptoms of thyroid tumors (such as a mass in the neck, difficulty swallowing, difficulty breathing or shortness of breath, persistent hoarseness The most common Semaglutide side effects are nausea, constipation, decreased appetite, dizziness, hypoglycemia, vomiting, dyspepsia, abdominal pain, diarrhea, headache, fatigue, increased lipase.

Nausea is the most common side effect when first starting Semaglutide but decreases over time for most people as their body gets used to the medicine. The dosing schedule is designed to reduce the likelihood of gastrointestinal symptoms. Tell your health care professional if you have any side effects that bother you or that do not go away.

RISKS OF SEMAGLUTIDE TREATMENT includes but not limited to:

Common (up to 5% of persons): dysgeusia (altered sense of taste), dry mouth, insomnia, asthenia; burping; constipation; diarrhea; dizziness; dry mouth; gallbladder disorders; gastrointestinal discomfort; gastrointestinal disorders; insomnia; nausea; vomiting, hypoglycaemia, dyspepsia, gastritis, gastro-oesophageal reflux disease, flatulence, upper abdomen pain, abdomen distension, cholelithiasis, injection site reactions, fatigue, increased lipase and increased amylase.

Uncommon: Malaise; pancreatitis; tachycardia; urticaria

Rare: Renal impairment, allergic reaction, anaphylaxis

DO NOT TAKE SEMAGLUTIDE IF any of the below contraindications apply to you:

- Aged under 18 or above 75
- Severe renal/kidney impairment (with eGFR of 15 or below) or a history of renal disease
- Severe hepatic/liver impairment
- Personal or family history of medullary thyroid cancer (MTC)
- Hypersensitivity to Semaglutide or to any of the excipients: disodium phosphate dihydrate, propylene glycol, phenol and water for injection.
- Concurrent treatment with any other products for weight management
- Weight problems related to endocrinological or eating disorders
- Concurrent insulin or sulfonylurea medication
- Patients on warfarin (more frequent INR monitoring required)
- Concurrent use of any medicinal products with may cause weight gain
- Pregnancy, breastfeeding or trying to/planning to become pregnant.
- Congestive heart failure

- History of pancreatitis, gallbladder disease, inflammatory bowel disease, diabetic gastroparesis.
- Patients with a personal or family history of MEN 2 (Multiple Endocrine Neoplasia syndrome

THE BELOW DRUGS INTERACT WITH SEMAGLUTIDE and treatment of Semaglutide should not be used concurrently.

Drug interactions:
- Alogliptin,
- Biphasic insulin aspart
- Biphasic insulin lispro
- Biphasic isophane insulin
- Canagliflozin
- Dapagliflozin
- Dulaglutide
- Empagliflozin
- Exenatide
- Glibenclamide
- Gliclazide
- Glimepiride
- Glipizide

any insulin including:
- Aspart
- Degludec
- Detemir
- Glargine
- Glulisine
- Lispro
- Isophane
- Zine suspension
- Nateglinide
- Pioglitazone
- Repaglinide Saxagliptin
- Sitagliptin
- Vildagliptin
- Tolbutamide

- I am aware that other unforeseeable complications could occur. I do not expect the clinic to anticipate and or explain all risk and possible complications. I rely on them to exercise judgment during the course of treatment.
- I understand the risks and benefits of the treatment and have had the opportunity to have all of my questions answered.
- I understand that I have the right to consent to or refuse any proposed treatment at any time prior to its performance.
- At any stage during the treatment, I have the right to request that the procedure is terminated, however I accept that I will not be reimbursed once supply has commenced.

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SIGN ABOVE

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DATE