



Testosterone and/or Estradiol Pellet Insertion Consent Form

Bioidentical hormone pellets are concentrated hormones, biologically identical to the hormones you make in your own body prior to menopause. Estrogen and testosterone were made in your ovaries and adrenal glands in greater quantities when you were younger. Bioidentical hormones affect your body the same way your own estrogen and testosterone did at a younger age, without the inconsistencies in levels due to menstrual cycles.

Bioidentical hormone pellets are compounded and are FDA monitored but not approved for female hormonal replacement. The pellet method of hormone replacement therapy has been used in Europe and Canada for many years and by select OB/GYN physicians in the United States.

Patients who are not sterilized and menopausal are advised to continue reliable birth control while participating in pellet hormonal replacement therapy. Testosterone is category X (will cause birth defects) and cannot be given to pregnant women. My method of birth control is: *(please check one)*

- Abstinence
- Hysterectomy
- Menopause
- Vasectomy
- Birth control pill
- IUD
- Tubal Ligation
- Other _____

CONSENT FOR TREATMENT: I HAVE BEEN INFORMED THAT I MAY EXPERIENCE ANY OF THE COMPLICATIONS TO THIS PROCEDURE DESCRIBED BELOW. THESE SIDE EFFECTS ARE SIMILAR TO THOSE RELATED TO TRADITIONAL TESTOTERONE AND/OR ESTROGEN REPLACEMENT. SURGICAL RISKS ARE THE SAME AS FOR ANY MINOR MEDICAL PROCEDURE AND ARE INCLUDED IN THE LIST OF OVERALL RISKS BELOW.

Risks of Estrogen and Testosterone Pellet Insertion:

- Bleeding, infection and pain at the insertion site
- Lack of effect
- Breast tenderness and swelling, especially the first three weeks
- Increase in hair growth on the face
- Water retention
- Increased growth of estrogen dependent tumors (*endometrial cancer, breast cancer*)
- Birth defects in babies exposed to testosterone during gestation
- Blood clots
- Growth of liver tumors, if already present
- Clitoral enlargement
- Change in voice
- Acne
- Extrusion of the pellet

Benefits that have been explained to me include:

- Increased libido, energy and sense of well-being
- Decreased frequency and severity of hormonal migraine headaches
- Decrease in mood swings, anxiety and irritability
- Increase in muscle mass and a decrease in subcutaneous fat
- Improvement in balance
- Decreased central obesity
- Improved dry eyes
- Improvement in vaginal lubrication
- Possible improvement from arthritis and fibromyalgia
- Decrease in risk and severity of diabetes
- Decreased risk of heart disease
- Decreased risk of Alzheimer's and dementia





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I have read and understand the above. I have had the opportunity to ask any questions regarding pellet therapy. All of my questions have been answered to my satisfaction. I further acknowledge that there may be risks of testosterone and/or estrogen therapy that we do not know at this time. I understand that the risks and benefits of this treatment have been explained to me and I have been informed that I may experience complications, including one or more of those listed above. I accept the risks and benefits and I consent to the insertion of hormone pellets under my skin. This consent is ongoing for this and all future pellet insertions.

I agree to allow Amy Garza, MD to implant the bioidentical hormone pellets. I understand that Dr. Garza will not be assuming care as my primary physician. I agree to have an annual exam including a breast exam, pap smear and mammogram as deemed appropriate by my primary care provider. I agree to hold Dr. Garza harmless for any complications that may occur. I have discussed any questions and concerns with the doctor.

Print Name

Signature

Date

