

Holotropic Breathwork

Medical Information Form

Holotropic Breathwork is intended as a personal growth experience, and should not be looked upon as a substitute for psychotherapy. Holotropic Breathwork can involve dramatic experiences accompanied by strong emotional and physical release. This workshop is not appropriate for pregnant women, or for persons with cardiovascular problems, severe hypertension, severe mental illness, recent surgery or fracture, acute infectious disease or epilepsy. If you have any doubt about whether you should participate, consult with your physician or therapist as well as the facilitators before proceeding.

The answers to the following questions are to assist your facilitators and will be kept strictly confidential. Please answer as completely as possible.

	<u>YES</u>	<u>NO</u>
1) Do you have a history of, or currently suffer from any of the following:		
a) Cardiovascular disease, including heart attacks	___	___
b) High blood pressure	___	___
c) Severe mental illness	___	___
d) Recent surgery	___	___
e) Past or recent physical injuries, including fractures or dislocations	___	___
f) Recent or current infectious or communicable diseases	___	___
g) Glaucoma	___	___
h) Retinal detachment	___	___
i) Epilepsy	___	___
j) Osteoporosis	___	___
k) Asthma (if "Yes," please bring your inhaler to workshop)	___	___
2) Are you currently pregnant?	___	___
3) Have you ever been hospitalized for medical reasons?	___	___
4) Have you ever been psychiatrically hospitalized?	___	___
5) Are you currently in therapy or involved in any type of support group?	___	___
6) Are you currently taking any type of medication?	___	___
7) Were there any complications at your birth? e.g. Caesarean section/Anesthesia	___	___
8) Is there anything else about your physical or emotional status of which we should be aware?	___	___

I hereby confirm that I have read and understood the above information and have answered all the questions completely and honestly, and have not withheld any information. My general health, as far as I'm aware, is good.

Printed Name

Signature

Date