

Texas Star Pharmacy Patient Intake Form

Lifestyle Choices

How often do you cook at home?	Typical foods cooked?
How much water do you drink daily?	Water type:
How often do you eat out/fast food?	Restaurants:
Do you consume artificial sweeteners?	Type/Frequency:
Do you drink alcoholic beverages?	Type/Frequency:
Do you use tobacco or tobacco products more than casually? Yes/No Type/Frequency:	
Do you have pets? (Indicate # of each) ___ Dog ___ Cat ___ Fish ___ Bird ___ Other _____	
Do you use organic products? Yes/No	How often:

By signing below, I verify that I understand that the providers, Donna Barsky, PharmD, and our clinical pharmacy team are not physicians and that the counsel given is restricted to the correction of underlying deficiencies, optimizing hormonal imbalances, dietary guidance, symptom management and nutritional counseling. This counseling is not a substitute for medical care by my primary care physician, nor is it intended to diagnose or treat any disease. I also understand that I am responsible for full payment at the time of services for consultations, testing kits and medications and supplements, and that no third-party billing or any form of non-cash payment will be accepted in lieu of actual payment. (Please sign below)

Signature:

Date:

Rates For Consultations and Other Services Are As Follows:

Introductory Consultation - 15 Minutes	No Charge
Initial Health Consultation - 1 Hour	\$120.00
Follow-Up Consultations - 30 Minutes	\$60.00
All consultations are by appointment only. Please kindly give us a 24-hour notice for cancellation of appointments.	
Blood Typing	\$25.00
5-Hormone Panel Saliva Testing	\$260.00

