

Jennifer Y. Park, MD, FACOG
Bryan S. Jick, MD, FACOG
Maria Figueroa, RN
625 South Fair Oaks Ave
Suite 255A
Pasadena, CA 91105



Telephone 855-673-5538
Telephone 626.304.2626
Facsimile 626.585.0695
www.pasadenapellets.com
NPI: 1831416734
Tax ID: 27-2443605

Male Testosterone Pellet Insertion Consent Form

Bio-identical testosterone pellets are concentrated, compounded hormone, biologically identical to the testosterone that is made in your own body. Testosterone was made in your testicles prior to "andropause." Bio-identical hormones have the same effects on your body as your own testosterone did when you were younger. Bio-identical hormone pellets are made from plants and are **FDA approved for men** for the treatment of andropause as hormonal replacement. The pellet method of hormone replacement has been used in Europe and Canada since the 1930's and by select doctors in the United States, such as Dr. Gambrell and Dr. Lobo, both Endocrine/Gynecologists. Your risks are similar to those of any testosterone replacement but may be lower risk. During andropause, the risk of not receiving adequate hormone therapy can equal the risks of replacing testosterone with pellets.

Risks of not receiving testosterone therapy after andropause include:

Arteriosclerosis, elevation of cholesterol, obesity, loss of strength and stamina, generalized aging, osteoporosis, mood disorders, depression, arthritis, loss of libido, erectile dysfunction, loss of skin tone and many other symptoms of aging.

Testosterone pellet therapy is generally suggested for you after traditional methods for replacement have failed or because you seek a more physiologic treatment for andropause. Urologic consultation or primary care doctor approval for this therapy should be obtained prior to consenting and written permission by your physician is NECESSARY before beginning testosterone pellet replacement therapy.

CONSENT FOR TREATMENT: I consent to the insertion of testosterone pellets in my hip, abdominal wall or flank (love handle). I have been informed that I may experience any of the complications to this procedure as described below. Surgical risks are the same as for any minor medical procedure and also include:

- Bleeding, bruising, swelling, infection and pain
- Lack of effect (from lack of absorption)
- Thinning hair, male pattern baldness
- Increased growth of prostate and prostate tumors (questionable)
- Growth of liver tumors
- Expulsion of pellets

BENEFITS OF TESTOSTERONE PELLETS INCLUDE:

- Increased libido, energy and sense of well-being
- Decreased frequency and severity of migraine headaches
- Decrease in mood swings, anxiety and irritability (secondary to hormonal decline)

I understand that there may be risks of testosterone therapy that we do not yet know, at this time, and I accept those and all the above risks by accepting therapy and signing below. This consent is ongoing for this and all future insertions.

Print Name: _____

Signature: _____

Today's Date _____/_____/_____