



## CONSENT FOR TREATMENT

### Physician Supervised Medical Weight Loss

#### PURPOSE AND BACKGROUND

As a patient of Nourished MedSpa and Wellness Center, I have requested weight loss therapy, which is used to treat obesity. The procedure may require multiple sequential treatments and/or visits. I request and consent to HCG injections along with a strict low-calorie diet for the purpose of losing weight. I understand that Nourished MedSpa and Wellness Center is a medical weight loss practice and that the program will be supervised by a licensed medical doctor, Jason Carter M.D. I understand that I will be instructed on how to administer the injection myself (*one shot per day*) or make arrangements to have someone do so for me. I understand that a complete medical history will be performed to rule out any conditions that would disqualify me from my program. I further understand that there could be risks involved, as there are with all medications, and that **not complying with the dietary guidelines could increase risks and alter the results**. I understand that Nourished MedSpa and Wellness Center uses real pharmaceutical FDA approved drug with a trade name of Pregnyl®. (*HCG is an FDA approved drug but NOT approved for weight loss*). I understand that HCG has not been demonstrated to be effective adjunctive therapy in the treatment of obesity. There is no substantial evidence that it increases weight loss beyond that resulting from caloric restriction, that it causes a more attractive or "normal" distribution of fat, or that it decreases that hunger and discomfort associated with calorie-restricted diets. At this point, there are no studies that show the long-term adverse effect of HCG as a weight-loss therapy.

I understand that part of the HCG protocol involves injections with vitamins Methionine, Inositol, Choline and B-12. MIC injections are typically used as an adjunct to weight loss regimen. I understand that the role of Methionine is to process and help the liver eliminate fat; Inositol is a cofactor in helping the liver break down the fats and clear them in the stool; Choline aids in fat metabolism and may also provide an energy boost.

- An MIC shot is safe and generally has no side effects, even in higher doses
- Some redness and swelling at the injection site may occur. This should start to get better within forty-eight (48) hours.
- In rare cases, MIC can cause diarrhea, itching, transitory exanthema, urticaria, feelings of swelling of the whole body.
- People with chronic liver and/or kidney dysfunction should not take frequent MIC injections

I understand that though good results are expected, the possibility and nature of complications cannot be accurately anticipated and there can be no guarantee as expressed or implied either to the success or other result of treatment. I am aware that the duration of treatment is dependent on many factors including but not limited to: age, sex, tissue condition, my general health and lifestyle conditions. Clinical results will vary per patient. MIC injections alone will not help lose weight. Being on a diet will liberate fat cells and the purpose of the MIC is to help the liver clear the byproducts from my system. I understand that being on a strict diet is necessary for the MIC injections to work properly.

**APPETITE SUPPRESSANTS:** At the time of the writing of this consent form, I have been notified that there are 5 branded appetite suppressants on the market. These medications include Belviq, Contrave, Qsymia, Saxenda, and Xenical. Non-branded medications include diethylpropion, phendimetrazine, and phentermine. In addition, there are medications that are not appetite suppressants, but which may be used to augment my weight loss efforts, such as semaglutide. Considerations may include the cost of the medications, the expected length of the prescription time period, and relative and absolute contraindications from one medication that would favor another. At all times, the risk of my current health condition should be weighed against the risk/reward of using an appetite suppressant. I understand that I'm not required to use an appetite suppressant to lose weight but results are typically better with one.

I understand that appetite suppressants, such as phentermine, have package labeling which recommends the use of the medication for obese individuals, for time periods of up to 12 weeks, and at the dosage indicated in the labeling. Recently, national societies such as the Endocrine Society and the Obesity Medicine Association have issued position papers advocating for the longer term (> 12 weeks) use of phentermine as the risk/benefit analysis appears to favor the longer-term usage.<sup>3, i, iv</sup>

**GUIDELINES FOR ANORECTIC USAGE:** I understand that Nourished MedSpa and Wellness Center as well as Dr. Carter uses guidelines for anorectic (appetite suppression) usage as stated by a variety of organizations such as the Obesity Medicine Association (OMA), AACE/ACE and the Endocrine Society. Pharmacotherapy generally is used as an adjunct to behavioral modification to reduce food intake and increase physical activity. I understand my treatment may involve, but not be limited to, the use of appetite suppressants for more than 12 weeks and when indicated in higher doses than the dose indicated in the appetite suppressant labeling. I understand that my program may consist of a balanced deficit diet, a regular exercise program, and instructions in behavior modification techniques, and may involve the use of appetite suppressant medications.

Pharmacotherapy is indicated for the purpose of treating the disease of obesity<sup>i</sup> which has a variety of definitions, preventing the relapse of obesity and to treat and lessen the risk of complications of weight related conditions. Indications for my initiation and continuation of anorectics include:

- BMI > 30 (Caucasians) and > 27 in certain ethnic populations in normal healthy individuals<sup>\*, iii</sup>
- BMI > 27 in individuals with co-morbidities (DM, HTN, insulin/leptin resistance, vascular disease, hyperlipidemia, asthma, cancer, GERD, OSA, kidney disease, osteoarthritis, gallstones, PCOS, psoriasis, acrochordon, acanthosis nigricans, or other related conditions)<sup>\*, iii</sup>
- BMI > 25 with the above listed comorbidities and certain ethnic populations > 23 with the above listed conditions<sup>†</sup>
- Current weight > 120% of a long-standing healthy weight maintained after the age of 18<sup>ii</sup>
- Body fat >32% in females and >25% in males (obesity)<sup>\*</sup>
- Waist circumference > 31” or > 35” in women and > 37” or > 40” in men (increased and high risk)<sup>\*†</sup>
- Waist circumference in certain ethnic populations<sup>\*†</sup>:
  - Asians, Central and South American > 31” in women and > 35” in men
  - Europids, Middle Eastern > 31” in women and > 37” in men
- Any co-morbid condition that is aggravated by weight<sup>\*</sup>
  - Fat mass disease such as: hypertension, shortness of breath, impaired mobility, low self-esteem, body image dissatisfaction, decreased work productivity, negative self or external perceptions and others.
  - Sick fat disease such as: atherogenic dyslipidemia, increased triglycerides, insulin resistance, fatty liver, asthma, osteoarthritis, PCOS, hirsutism, low testosterone, intimacy problems, impaired fertility, prevention of cancer, sleep disorders, and others.
- Prevention of weight regain in a person who has previously lost weight<sup>i, iv, ‡</sup>
- Weight loss for occupational needs<sup>\*</sup>
- Prevention of weight gain in a person who has a familial/genetic predisposition to obesity, cancer, or other obesity related conditions<sup>\*</sup>

\* Obesity as defined by the OMA’s Obesity Algorithm

† AACE/ACE Clinical Practice Guidelines.

‡ Endocrine Society Clinical Practice Guideline

i – OMA position statement on anti-obesity medications – 3/2015

ii – ASBP Overweight and Obesity Evaluation and Management guidelines – 2009

iii – FDA guidelines for anti-obesity medications

iv – OMA, pharmacotherapy position statement 2016

### **OFF LABEL PRESCRIBING**

I understand that a provider is not required to use the medication as the labeling suggests. This is called off label prescribing and is specifically provided for by the FDA. Dr. Carter has found the combination of HCG with a very low-calorie diet to be helpful in weight loss. The indications for these usages are based on his experience, the experience of his colleagues, and guidelines from various medical societies. Such usage has not been as systematically studied as that suggested in the labeling and it is possible, as with most other medications, that there could be serious side effects. I believe the probability of such side effects is outweighed by the benefit of weight loss for the given dose and indication. I have decided that I am willing to accept the risks of side effects, even if they might be serious, for the possible help the diet plan may give. Dr. Carter has found appetite suppressants and other non-anorectic type medications to be helpful for periods exceeding 12 weeks and at doses larger than those suggested in the labeling. The indications for these usages are based on his experience, the experience of his colleagues, and guidelines from various medical societies. Such usage has not been as systematically studied as that suggested in the labeling and it is possible, as with most other medications, that there could be serious side effects. I believe the probability of such side effects is outweighed by the benefit of the appetite suppressant for the given dose and indication. I have decided that I am willing to accept the risks of side effects, even if they might be serious, for the possible help the appetite suppressants and other non-anorectic type medications may give.

I have read and understand the following statements: “The FDA and pharmaceutical companies have put forth suggestions for using prescription medications. The appetite suppressant medication label’s suggestions are generally based on shorter term studies (up to 12 weeks) using the dosages indicated in the labeling. As a physician, I have found the appetite suppressants helpful for periods far in excess of 12 weeks, and at times in larger doses than those suggested in the labeling. As a physician, I am not required to use the medication as the labeling suggests, but I do use the labeling as a source of information along with my own experience, the experience of my colleagues and recent longer-term studies. Based on these, I have chosen, when indicated, to use the appetite suppressants for longer periods of time, and at times, in increased doses. Such usage has not been systematically studied and it is possible, as with most other medications, that there could be serious side effects. As a physician, I believe the probability of such side effects is outweighed by the benefit of the appetite suppressant use for longer periods of time and when indicated in increased doses. However, you must decide if you are willing to accept the risk of the side effects, even if

they might be serious, for the possible help the appetite suppressants used in this manner may give.”

### **PURPOSE**

I understand the purpose of this treatment is to assist me in my desire to achieve and maintain a healthy weight. My continuing to participate in weight loss programs will be dependent on my progress in weight reduction and weight maintenance. **Weight loss drugs are used as an adjunct in a regimen of weight reduction based on exercise, behavioral modification and caloric restriction in the management of exogenous obesity.**

### **RESPONSIBILITY**

It is my responsibility to follow dosing instructions carefully and to report promptly any medical problem(s) that may be related to my weight control program. I understand that in general, medications will not be prescribed without an office visit. One-time, short term exceptions can be decided on a case by case basis. Abuse of this policy or diversion of medications to individuals other than myself is grounds for dismissal.

**DRUG TESTING:** I understand that if I am drug tested as part of my employment or for another purpose, and are prescribed a stimulant medication, I may test positive for amphetamines. If needed, I may request a doctor’s note to state you are taking a medication to aid in weight loss.

### **ALTERNATIVES**

There are multiple ways to decrease body weight and maintain a healthy weight. I do not have to take any medications to lose weight. A reduced calorie diet or a protein-sparing modified fast and regular exercise without the use of appetite suppressants or HCG could help, even though I may be hungrier, and the weight loss may not be as great.

### **RISK OF PROPOSED TREATMENT**

With HCG, there are possible risks of fatigue, mild headaches, bruising or swelling at the injection site or possible allergic reaction. I understand that two specific side effects have been rarely reported with the use of HCG (**blood clots and ovarian hyper-stimulation syndrome**). In addition, unless medically indicated, typical weight loss plans, after the first several weeks of dieting, the weight loss should not exceed a rate of three pounds or approximately one- and one-half percent of body weight per week. I understand that rapid weight loss may be associated with increased risk of developing **gallbladder disease**. I also understand that weight loss can produce physical changes in the body such as interruptions in the menstrual cycle, temporary hair loss and dizziness. Such changes may indicate more serious health complications and must be reported to the Provider immediately. I understand that the use of anorectic medications, involves some risk. Risks are higher for dosages that exceed the recommended labeling. Common stimulant type medication side effects include: **insomnia, palpitations, dry mouth, headaches, psychological problems, medication allergies, high blood pressure, and dependence**. Blood pressure may be more elevated when taken with pseudoephedrine, a cold medicine. Rare, but serious risks include **primary pulmonary hypertension and valvular heart disease**. I have been made aware that these were observed rarely with fenfluramine and have a very rare occurrence with other appetite suppressants but have not been found to have a direct association. These risks may be slightly higher with Belviq (Lorcaserin), a weight loss medication like fenfluramine. Medications containing topiramate increase the risk of cleft palate in a developing fetus. Liraglutide (Saxenda) increase risk of thyroid cancers and pancreatitis. These and other possible risks could, on rare occasion, be serious or fatal.

**My role:** My success depends upon my commitment to fulfilling my obligations during treatment. I am willing to:

- Provide honest and complete answers to questions about my health, weight, eating, and lifestyle patterns.
- Devote the time needed to complete and comply with the course of treatment as prescribed.
- Attend my appointments regularly and follow my diet and exercise prescription.
- Obtain blood/diagnostic tests which may be deemed necessary during my treatment.
- Advise the clinic staff of ANY concerns, problems, complaints, symptoms, or questions even if I think it is not terribly important. This affords the best chance of intervening before a problem becomes serious

### **RISKS ASSOCIATED WITH BEING OVERWEIGHT**

I understand that people who are overweight or obese have greater tendencies toward: hypertension, diabetes /metabolic syndrome/insulin resistance, high cholesterol, asthma, GERD, fatigue, heart attack, stroke, peripheral vascular disease, abnormal cardiac rhythms, obstructive sleep apnea, pulmonary hypertension, migraines, arthritis, low back pain, depression, anxiety, decreased fertility, PCOS, various types of cancer and other problems. ***These risks/conditions can be reduced with weight loss of as little as 5 percent.*** I understand that dosages may need to be adjusted as my diet progresses.

### **UNKNOWN SIDE EFFECTS**

The possibility always exists in medicine that the combination of a disease with methods employed for its treatment may lead to previously unobserved or unexpected effects, including death. I understand that should one or more of these conditions occur, additional medical or surgical treatment may be necessary.

### COMMON SIDE EFFECTS

During a low-calorie diet, common side effects can be: *a reduced metabolic rate, increased urination, dizziness, sensitivity to cold, a slower heart rate, dry skin, fatigue, diarrhea, constipation, bad breath, dry or brittle hair, hair loss, muscle cramps, or menstrual changes.* These responses are temporary and resolve when calories are increased after the period of weight loss.

### GALLSTONES AND PANCREATITIS

Overweight people develop gallstones at a rate higher than normal weight individuals. The chances of developing gallstones increase with body weight and age. Chances double for women, estrogen users, and smokers. A low-fat diet increases the chance of forming/developing stones or having complications of existing stones. If symptoms develop: right upper abdominal pain (gallbladder pain), left upper abdominal pain (pancreatitis), or if you suspect gallstones, inform your provider immediately. Abuse of alcohol and certain drugs are also associated with pancreatitis. Gall stones may need a medication or surgery. They may be associated with serious complications or even death.

### PREGNANCY

To the best of my knowledge, I am not pregnant. I am aware of the precautions that should be taken to avoid pregnancy while I am on medication. If I become pregnant, I will report this to my health care professional and physician immediately. My calorie restricted diet must be stopped promptly to avoid further weight loss and potential damage to a developing fetus. ***I will take precautions to avoid becoming pregnant during the course of treatment and for 4 weeks afterward with at least two forms of birth control.*** I understand that I can request birth control pills or a referral for IUD placement or discussion of other methods of birth control.

### RISK OF WEIGHT RE-GAIN

I understand that obesity is a chronic condition, and the majority of overweight individuals who lose weight have a tendency to regain all or some of it over time. Factors which favor maintaining a healthy body weight include regular exercise, adherence to a healthy diet, and having a coping strategy for weight regain before it occurs. Successful treatment may take months or years.

### SUDDEN DEATH

I understand that patients with morbid obesity and serious health problems such as severe hypertension, heart disease, or diabetes, have a statistically higher chance of suffering sudden death when compared to normal weight people without these problems.

**Rare instances of sudden death have occurred while obese patients were undergoing medically supervised weight reduction, though no cause and effect relationship with the diet has been established.** Other rare risks are primary pulmonary hypertension and valvular heart disease.

### RIGHTS AND RESPONSIBILITIES

I understand that I may leave treatment at any time. I will notify Dr. Carter that I am discontinuing treatment and I am responsible to find another physician for myself who is able to assume medical care for me after I leave treatment. I will take the medication exactly as prescribed.

### PHOTOGRAPHS

I consent to the taking of clinical photographs and/or videos to evaluate treatment effectiveness, for medical education, training, professional publications or sales purposes. I understand my identity will be protected and they are the property of Nourished MedSpa and Wellness Center.

### COST/PAYMENT

I understand that this procedure is an "elective" procedure and that payment is my responsibility. Any expenses which may be incurred by medical care I elect to receive outside of this office, such as, but not limited to dissatisfaction of my treatment outcome, will be my sole financial responsibility. Insurance does not cover these procedures. If a follow-up treatment is requested/required, I understand that I will be responsible for the cost of that additional treatment. Payment in full for all treatments is required at the time of service and is non-refundable. I understand that I may request a price quote before treatment.

### RESULTS

I am advised that though good results are expected, the possibility and nature of complications cannot be accurately anticipated and there can be no guarantee as expressed or implied either to the success or other result of treatment. I am aware that follow-up treatments and ongoing weight loss efforts will be needed to maintain the full effects. I am aware that the duration of treatment is dependent on many factors including but not limited to: age, sex, tissue condition, my general health and lifestyle conditions. Clinical results will vary per patient. I understand that neither Nourished MedSpa and Wellness Center nor Dr. Jason Carter can guarantee any results or that there will be no harm. The potential health risks and benefits of using medications or various methods for weight loss have been explained to me to my satisfaction.

### QUESTIONS

This procedure has been explained to me by the staff of Nourished MedSpa and Wellness Center. I have had an opportunity to ask any questions and research the procedure to my satisfaction.

**CONSENT**

I understand that my consent and authorization for this procedure is strictly voluntary. I have already read and signed the Clinic’s general consent and understand that it is still in effect. By signing this informed consent form, I hereby grant authority to Nourished MedSpa and Wellness Center and Dr. Jason Carter, MD (or other delegated medical providers for Nourished MedSpa and Wellness Center) to perform physician assisted weight loss therapy and/or administer any related treatment as may be deemed necessary or advisable in the diagnosis and treatment of my condition. For purposes of advancing medical education, I consent to the admittance of observers to the treatment room and the use of depersonalized data in research.

The nature and purpose of this procedure and the complications and side effects have been fully explained to me. Alternative treatments and their risks and benefits have been explained to me and I understand that I have the right to refuse treatment. I agree to adhere to all safety precautions and instructions after the treatment. I have been instructed in and understand post treatment instructions and have been given a written copy of them. I understand that no refunds will be given for treatments received. No guarantee has been given or implied by anyone as to the results that may be obtained from this treatment.

I have read this informed consent and certify that I understand its contents in full. All of my questions have been answered to my satisfaction and I consent to the terms of this agreement. I have had enough time to consider the information given me by my physician/practitioner and feel that I am sufficiently advised to consent to this procedure. I accept the risks and complications of the procedure. I certify that if I have any changes occur in my medical history I will notify Nourished MedSpa and Wellness Center immediately.

I hereby voluntarily consent to this procedure and release Nourished MedSpa and Wellness Center, medical staff, and all associated professionals from liability associated with the procedure. I certify that I am a competent adult of at least 18 years of age and am not under the influence of alcohol or drugs. This consent form is freely and voluntarily executed and shall be binding upon my spouse, relatives, legal representatives, heirs, administrators, successors and assigns.

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<b>Patient Name (please print)</b>	<b>Patient Signature</b>	<b>Date</b>
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<b>Performed by (please print name and title)</b>	<b>Practitioner Signature</b>	<b>Date</b>
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Nourished MedSpa and Wellness Center
Weight Loss Patient Information

Date: \_\_\_\_\_ Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

WEIGHT HISTORY

Current Weight \_\_\_\_\_

Desired Weight \_\_\_\_\_

Highest Weight (excluding pregnancy) \_\_\_\_\_, Your age then? \_\_\_\_\_

Lowest Weight (excluding pregnancy) \_\_\_\_\_, Your age then? \_\_\_\_\_

Have you ever stayed the same weight for 10 years or more? Yes [ ] No [ ]

How did your weight gain start? Describe any circumstances: \_\_\_\_\_

What do you think is the cause of your weight problem? \_\_\_\_\_

DIET HISTORY

Have you attempted to lose weight before? Yes [ ] No [ ]

If yes, what is the most weight you lost? \_\_\_\_\_ How long did it take? \_\_\_\_\_

Which of the following methods of weight loss or dietary restriction have you tried (or currently on)?

- Vegetarian diet, Vegan diet, Low calorie diet, Intermittent fasting diet, Body for Life diet, Nutrisystem, Jenny Craig, Weight Watchers, Atkins Diet, South Beach diet, Ketogenic diet, Liquid diet (juice fast), Blood-type diet, Low-fat diet, Low glycemic-index diet, Macrobiotic diet, Mediterranean diet, Raw foods diet, Organic foods diet, Low-protein diet, Low-sodium diet, DASH diet, Gluten-free diet, Lactose free diet

Do you eat 3 meals/day? Yes [ ] No [ ]

If not, how many? \_\_\_\_\_

Which meals do you commonly miss? \_\_\_\_\_

Patient Initial \_\_\_\_\_

Do you graze throughout the day? Yes  No

How many times/week do you eat out or pick something up to bring home? \_\_\_\_\_

Are you a nighttime eater? Yes  No

If so what do you normally eat? \_\_\_\_\_

Are you a binge eater? Yes  No

History of purging after you binge? Yes  No

If yes, are you purging through exercise, vomiting, laxatives, or diuretics? \_\_\_\_\_

Do you do the majority of the grocery shopping? Yes  No

Do you or other people think you eat too fast? Yes  No

Do you cook at home? Yes  No

Is your spouse, fiancée or partner overweight? Yes  No

Do you have any overweight children? Yes  No

If you are a vegetarian, what foods will you not eat? \_\_\_\_\_

Have you used weight loss medications in the past? Yes  No

If yes Name: \_\_\_\_\_

If you have taken weight loss medication in the past, how long ago did you take it? \_\_\_\_\_

If you have taken weight loss medication did you experience side effects? Yes  No

If yes, please explain \_\_\_\_\_

If you have taken weight loss medication in the past, how much weight did you lose? \_\_\_\_\_

Do you drink coffee? Yes  No  How much? \_\_\_\_\_

Do you drink regular soda pop? Yes  No  How much? \_\_\_\_\_

Do you drink diet soda pop? Yes  No  How much? \_\_\_\_\_

Do you crave/eat sugar & carbohydrates Yes  No  This is a problem for me

Do you exercise? Yes  No

If yes, how often and what kind? \_\_\_\_\_

What time do you normally first put some type of food in your mouth? \_\_\_\_\_

What time do you normally finish eating/snacking before going to bed at night? \_\_\_\_\_

Do you experience chronic pain? Yes  No

Do you have any autoimmune disorders? Yes  No

If yes, what? \_\_\_\_\_

Do you smoke? Yes  No

Are you often exposed to chemicals? Yes  No  \_\_\_\_\_

How much purified water do you drink per day?  little to none  with meals  at least half my body weight in oz

Patient Initial \_\_\_\_\_



Regarding sleep:  I get enough sleep and feel rested upon waking  I have difficulty falling asleep  
 I wake up and can't get back to sleep  I have broken sleep  I have difficulty getting up and moving in the morning

**Activity Level: (answer only one)**

- Inactive—no regular physical activity with a sit-down job.
- Light activity—no organized physical activity during leisure time.
- Moderate activity—occasionally involved in activities such as weekend golf, tennis, jogging, swimming or cycling.
- Heavy activity—consistent lifting, stair climbing, heavy construction, etc., or regular participation in jogging, swimming, cycling or active sports at least three times per week.
- Vigorous activity—participation in extensive physical exercise for at least 60 minutes per session 4 times per week.

Think about your weight and honestly answer how it is affecting your life in each of the following places:

**Work/Productivity:**

- Increases  Decreases  Doesn't Affect

**Energy Levels:**

- I'm Vibrant  I'm Tired  I'm Exhausted  Doesn't Affect

**Sleep:**

- More Rested  Less Rested  Doesn't Affect

**Mood:**

- I'm Happier  I'm More Irritable  Doesn't Affect

**Hobbies/Sports:**

- Improves Performance & Enjoyment  Negatively Affects  N/A

**Social Life:**

- Makes me More Social  I'd Rather Stay Home  Doesn't Affect

**Intimacy:**

- Improves it  This is a Problem  Doesn't Affect

**Family Life:**

- Enhances it  Negatively Effects  Doesn't Affect

**Marriage:**

- Enhances it  Source of Strain in my marriage  Doesn't Affect

**How motivated are you to lose weight now? \_\_\_\_\_ (0=None, 10=very motivated)**

I understand, have read and completed this questionnaire truthfully. I agree that this constitutes full disclosure, and that it supersedes any previous verbal or written disclosures. I understand that withholding information or providing misinformation may result in contraindications and/or complications from your treatment that may be irreversible and/or dismissal from the practice. The treatments I receive here are voluntary and I release this institution, all employees and contractors from liability and assume full responsibility thereof.

\_\_\_\_\_  
Date: \_\_\_\_\_

Patient Signature

Patient Initial \_\_\_\_\_





## PRE/POST TREATMENT INSTRUCTIONS

### Treatment with HCG

Welcome to the four different phases of the hCG diet! You're about to embark on an amazing weight loss journey and begin achieving some remarkable results, along with literally thousands of other people who have done the same. At Nourished MedSpa and Wellness Center, we present you with four different phases of the diet in order to comply with the original Dr. Simeons hCG diet protocol. We believe that if you follow the four phases, you'll achieve the best results.

It may seem overwhelming at first, but if you do the diet one step at a time, you'll start seeing the results you want. The following pages describe (in detail) the four different phases of the hCG diet. They are listed below:

Phase 1: Taking the hCG (either intranasal or shots) and calorie load (Days 1 – 2)

Phase 2: Starting the Very Low-Calorie Diet (Days 3 – 42)

Phase 3: Stabilization (Days 42 – 63)

Phase 4: Keeping Your Weight Off (Days 63 – Forever)

### **Phase 1: Taking the hCG and “Loading” (Days 1 – 2)**

For the first two days, start taking the hCG as prescribed

- During the first two days of taking the hCG, you'll also need to eat as much high fat food as you possibly can. You'll be storing fat to be used as energy during the low-calorie portion of the diet (described later). Don't skip this step; your energy level will suffer if you do!
  1. The best foods to eat are milk chocolate, pastries, ice cream, peanut butter, bread (with lots of butter), and pork. See page 10 of your guidebook for a list of what you can gorge on.

### **Phase 2: Starting the Low-Calorie Diet (Days 3 – 42)**

On the third day, you'll begin the low-calorie diet of 500 calories per day. Continue the low-calorie diet for 3 weeks (if you're trying to lose 15 to 20 pounds), or 6 weeks (if you're trying to lose 34 to 40 pounds). Weigh yourself every morning when you wake up. You should see a weight loss of ½ to 1 pound per day. You should come in to the clinic WEEKLY for weigh-in and to receive your next weeks' injections. You may also benefit from a fat burning shot called MIC (Methionine, Inositol and Choline with B-12 added).

- Eat only the foods from the following list. No variations are allowed. If an item is not on the list, then don't eat it! Trust me, you will plateau easily if you deviate from the menu.

Vegetarian Help Note: The diet instructions for vegetarians are exactly the same except for protein. You can either have 8oz skim milk or ½ cup non-fat cottage cheese, according to Dr. Simeons. If you eat fish, then you can also have the whitefish, shrimp and lobster that are permitted in the original protocol. Some vegetarians have also found success with tofu 'miracle noodles'. Vegetarians lose closer to ½ lb per day instead of 1 pound.

### **Drinks: Daily allowances**

Green/Black Tea	unlimited
Coffee	unlimited
Skim milk	1 tablespoon

Water	Unlimited (try to drink 2 liters)
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Use only pure Stevia for a sweetener. Be careful of additional additives in your sweetener.

**Protein: Two 100-gram servings per day**

Chicken	White fish (tilapia, halibut)
Shrimp	Extra lean ground beef
Steak	Lobster
Crab	Veal
<b>No eggs</b>	

You'll need to remove all of the fat from the meat and weigh it before cooking. Don't use oils to cook the meat, and avoid using spices containing sugar. **Eat two different proteins each day** (don't eat chicken for lunch and dinner, rather chicken for lunch and fish for dinner)

Note: The original protocol isn't specific about exactly how much a vegetable serving is, so use your best judgment. One serving is approximately two cups of salad, one tomato, one cucumber, one onion, or 1/2 cabbage. Be sure not to mix vegetables. **Only one vegetable is allowed per meal.**

Green salad	Onions
Cucumbers	Spinach
Tomatoes	Chard
Celery	Fennel
Red radishes	Asparagus
Cabbage	Chicory
Beet greens	

**Bread: One serving per day**

- 1 melba toast
- 1 grissini bread stick

**Note:** Melba toast is available at most grocery stores. Grissini is available at health food stores and Italian markets.

**Fruit: Two servings per day**

- 1 apple
- 1 orange
- 1/2 grapefruit
- Handful of strawberries

You can disperse the allotted food as you choose. However, the best option is to skip breakfast and break up your allowed food into lunch, dinner, and two snacks.

**Spices and Seasonings**

You can use any spice you want; just be sure it doesn't contain sugar. Salt and pepper are allowed. Be sure to read the ingredients of everything you consume. Even a minor intake of something that isn't allowed can slow down your diet considerably. Don't waste your money or time by looking for shortcuts during this diet.

**Example Daily Menus:**(this is just an example)

**Monday:**

**Breakfast:**

- Black Coffee, Tea, or water

**Lunch:** (100 grams of chicken, seasoning optional)

- 3 lettuce wraps
- 1 melba or grissini toast
- 1 orange
- black coffee, tea, or water

**Dinner:** (100 grams of extra lean beef patty, seasoning optional)

- Spinach (add lemon or apple cider vinegar for dressing)
- 1 melba or grissini toast
- black coffee, tea, or water

**Tuesday:**

**Breakfast:**

- 1 apple
- black coffee, tea, or water

**Lunch:**

- Tomato Basil Soup
- 1 melba or grissini toast
- black coffee, tea, or water

**Dinner:** (100 grams slow roasted beef brisket, seasoning optional)

- Spinach (add lemon or apple cider vinegar for dressing)
- 1 melba or grissini toast
- ½ grape fruit
- black coffee, tea, or water

**Note:** You can have gum, but **ONLY** if it is flavored with xylitol. (a natural sweetener). Most brands of gum use aspartame, which is not allowed.

Tips for Plateaus:

Do an “Apple Day” which begins at lunch and continues until just before lunch of the following day. You can eat an apple whenever you feel hungry, up to a total of 6 apples. During an apple day, no other food or liquids except plain water are allowed.

**Phase 3: Stabilization (Days 42 – 63)**

After day 21, (3 weeks if you're trying to lose 15 to 20 pounds,) or day 42 (6 weeks if you're trying to lose 34 to 40 pounds) you are ready to begin Phase 3. It is very important to **CONTINUE THE VERY LOW CALORIE DIET FOR 72 HOURS** after your last hCG injection. Then, you can begin to add more food back into your diet. Be sure to **avoid sugar and starch for 3 weeks.**

It's best to add foods back in one at a time so you can see how your body reacts to each item. You can have dairy, fats and oils, nuts, but beware of extra sweet fruit like bananas and mangoes during this phase.

Once you have successfully stabilized your weight, you are ready to add normal foods back into your diet, including bread and other starchy foods like potatoes (in moderation, of course). You can also eat food containing sugar, like

mangoes, bananas, and sweets. At this point of the diet, you will have developed a taste for healthy foods. It should also be much easier for you to make good eating decisions as well.

You'll still need to continue to weigh yourself every morning, and if you ever go two pounds above your lowest achieved weight, a steak day will put you back on track. A steak day is where you don't consume anything all day except water. For dinner, you'll eat a large steak. Later on that evening, you can either have one apple or one tomato. Just keep in mind that but it is important to do the steak day on the same day as the gain. Otherwise it isn't as effective. You should be able to maintain your new weight forever by following this simple system. The following morning, you should be back within two pounds of your lowest achieved weight. This is how you keep yourself from gaining back all the weight you lost earlier in Phase 2.

During Phase 3: Stabilization, you'll learn which foods your body doesn't digest well, and should be avoided.

#### **Phase 4: Keeping Your Weight Off (Days 63 – Forever)**

Did you know that habits (both good and bad) are made and broken in a 14-day time period? During your experience of the previous phases of the hCG diet, no doubt you have created some new and healthy eating habits. At this point you feel better physically and mentally than you ever have before. In addition, you discovered a new self-confidence, and a new you! If you go right back to eating the wrong types of foods, chances are you'll find yourself feeling sick, and you'll soon realize that your body actually craves healthier foods.

The hCG Diet is all about making a change in your lifestyle. Sure, losing weight is a part of that change, but the key is to lose weight and keep it off, forever. Take time to educate yourself on the causes of obesity, and surround yourself with people who to share the same goals as you do.

*Please contact our office at 903-357-5108 with any questions or concerns. If you have an emergency or urgent pressing clinical issue, call Dr. Carter at 903-818-3467. Texting is the best way to reach Dr. Carter.*

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**Patient Name (please print)**

**Patient Signature**

**Date**



## PRE-TREATMENT INSTRUCTIONS

### Treatment with Phentermine

#### **Who Is Phentermine For?**

Phentermine is a medication for weight management. It is for people with overweight and weight-related complications or obesity. It is meant to be used together with a lifestyle therapy regimen involving a reduced calorie diet and increased physical activity.

#### **How Does Phentermine Work?**

Phentermine is an appetite suppressant that works in the brain.

#### **Who Should Not Take Phentermine?**

- People who have heart disease or uncontrolled hypertension
- Women who are pregnant, nursing, or planning to become pregnant
- People who have glaucoma
- People with uncontrolled hyperthyroidism (overactive thyroid)
- People who are taking a monoamine oxidase inhibitor (MAOI) now or have taken one within the past 14 days
- People who are prone to agitation (extreme restlessness and irritability)
- People with a history of drug abuse

#### **How Is Phentermine Dosed?**

Take ½ to 1 tablet or capsule once a day before breakfast or 1-2 hours after breakfast.

Phentermine is approved for short-term weight loss therapy. The usual duration of treatment is 12 weeks or less.

#### **Is Phentermine a Controlled Substance?**

Yes, phentermine is a federally controlled substance because it may be abused or lead to drug dependence, as such prescriptions will only be written one month at a time.

#### **Which Medications Might Not Be Safe to Use with Phentermine?**

Phentermine can affect how other medicines work in your body, and other medicines can affect how phentermine works or make side effects worse. Tell your doctor about all the medicines and supplements you take (ask your doctor or pharmacist for a list if you're not sure), especially the following medicines:

- Monoamine oxidase inhibitors (MAOIs)—usually used to treat depression
- Adrenergic neuron blocking drugs—these are usually taken to treat high blood pressure or psychotic symptoms
- Other weight loss medications, including over the counter medications
- Selective serotonin reuptake inhibitors (SSRIs)—used to treat depression and anxiety

#### **What Are the Common Side Effects of Phentermine?**

- Dry mouth
- Restlessness
- Difficulty sleeping

- Increase in heart rate
- Increase in blood pressure

### What Are the Possible Serious Side Effects of Phentermine?

#### *Primary Pulmonary Hypertension*

A rare but often fatal disease of the lungs known as primary pulmonary hypertension has been reported in patients taking phentermine and phentermine-like products. Stop taking phentermine and call your doctor if you experience any difficulty breathing, severe chest pain, fainting, or swelling in the legs.

#### *Heart Valve Disease*

Serious heart valve problems or disease have been reported in patients taking phentermine or other phentermine-like products for weight loss. The possibility of an association cannot be ruled out.

#### *Low Blood Sugar (Hypoglycemia)*

Weight loss can cause low blood sugar in people with type 2 diabetes who also take medicines used to treat type 2 diabetes. Test your blood sugar before and during treatment with phentermine.

### Are There Any Special Precautions or Instructions with Phentermine?

1. Do not drink alcohol while taking phentermine.
2. Do not drive a car or operate heavy machinery until you know how phentermine affects you. Phentermine can slow your thinking and motor skills and also may affect your vision.
3. Increase energy with diet and exercise



Phentermine is famous for the strong, immediate energy it provides patients, but sometimes this boost isn't enough. Whether you no longer have energy from the pills due to increased phentermine tolerance, or never felt the extra energy in the first place, you will be happy to hear there are several ways to get more energy from phentermine. During your weight loss journey, choose to exercise regularly, consume nourishing foods, stay hydrated and prioritize sleep. While it may sound counter-intuitive, hitting the gym (or taking a walk) 3-6 times per week has been shown to increase energy and decrease fatigue [1]. More, eating right, planning your meals and staying well-hydrated gives your body the fuel it needs and helps keep energy levels up throughout the day.

4. Boost metabolism naturally

Exercise is critical for maintaining a healthy and speedy metabolism. Combining moderate aerobic activity with regular strength-training exercises (2-3x per week) has been shown to improve both stamina and maintain lean muscle mass [2]. This is important because weight loss, especially rapid weight loss, threatens metabolically-active lean muscle mass. Aim to include muscle-building activities like strength-training to maintain and boost metabolism [3].



5. Set SMART weight loss goals

Research shows that people accomplish goals more frequently – both in weight loss and in life – when the goals are SMART [4]:





- Specific
- Measurable
- Achievable
- Related to your overarching objective
- Time-bound

As you set-out on your weight loss journey with phentermine, work to transform your objectives into SMART goals. While this might take more time or planning in the beginning, it will be worth it in the end when you achieve your goal and stick with the changes long-term.

#### 6. Sleep for weight loss

Many people underestimate the importance of sleep and stress management in a successful weight loss journey. As you work to improve your diet and become more active, try to also work on prioritizing rest and managing stress.



Aim for 7-9 hours of sleep per night to balance hormones, reduce risk of chronic disease and give your body the time it needs to repair [5]. More, research shows that even simple stress management techniques can have a positive effect on weight loss [6].

#### 7. Take supplements with phentermine

In an effort to make phentermine work better, many patients look for supplements to take with phentermine. Some of the most common supplements to take with phentermine include:



- Melatonin
- Capsicum/Cayenne Pepper
- Pre-Workout Supplements
- Vitamin B12
- Conjugated Linoleic Acid (CLA)
- 5-HTP

5-HTP, for example, is a popular choice because research suggests that it may boost weight loss, plus decrease symptoms of insomnia and low mood [7-10]. Vitamin B12 shots are often prescribed by weight loss clinics to boost phentermine, but not all doctors agree that this supplementation is useful [11].

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**Patient Name (please print)**

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