



Wake Medical Massage, LLC

203 N Harrison Ave. Ste 206 Cary, NC 27513

919.228.9559

Wakemedical.Massagetherapy.Com

Practitioner's Clinic Name: _____

Contact Information: _____

Physician/Health-Care Provider's Permission

Client/Patient Information

Client/Patient Name: _____

Date of Birth: _____

Permission Granted to Shashi Lodhia CMLDT, LMBT

Specialty/Type of Treatment: _____

Reason for Permission

There is no reason to believe that Certified Manual Lymph Drainage (Vodder Technique), massage, or bodywork treatments will harm this client/patient's progress. However, please note the following considerations:

Description of condition:

Possible interactions with medications:

Special instructions:

Permission Granted by Physician/Health-Care Provider Name:

Phone: _____

Email: _____

Signature: _____

Date: _____

Please note: Should you notice anything unusual or significant during treatment, please notify this office immediately. Otherwise, any update at the conclusion of care would be appreciated.