



Kenton Cobb, Herbalist
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Informed Consent and Release of Liability

I am an Herbalist and educator. I am not a medical doctor nor do I practice standard Western medical assessment, diagnosis or treatment. I do not claim to cure disease, nor do I offer advice about the use of any type of pharmaceuticals or medications at any time. If you choose not to follow the recommendations made by your medical doctor or other practitioners, you understand that such a decision is your (the client's) responsibility and will not hold any other persons responsible for any consequences of such a decision.

Good health is your own personal responsibility; the final decision in any recommendation -whether to follow it or not – is always yours. Any nutritional/herbal/lifestyle suggestions are not a replacement for the medications prescribed by your medical doctor. You have sought advice and are free to act upon my recommendations as you see fit, and, as such, release me (Kenton Cobb) of all responsibility for my actions and any consequences thereof, both now and in the future.

I have no objections to my clients being seen or evaluated by their own medical doctor. If you have any questions or concerns about your health, I highly recommend you discuss them with your physician. I am available to work as part of your health care team by contacting any physicians and other health care providers you are currently seeing to discuss your care. I am happy to provide you with recommendations and research in writing that you can discuss with your other healthcare providers at any time.

Currently, herbalism is not considered a recognized health care modality in Pennsylvania. As such, there is no state or national licensing for herbal practitioners. My training is in Traditional Western Herbalism and constitutional assessment from the Northeast School of Botanical Medicine (NY), Clearpath School of Herbal Medicine (MA), Commonwealth Center for Holistic Herbalism (MA), as well as other individual classes, apprenticeships and focused self-study.

With herbal medicine, I work within the vitalist paradigm, drawing on traditional knowledge and experience as well as current science and research on herbal medicine. Nutritionally, I work with the principles of traditional/ancestral nutrition. With lifestyle modifications, I work using a trauma-informed and harm-reduction framework.

My basic approach is to combine alternative healing methods with the latest scientific findings and clinical practices. My goal is to offer you support to help restore your ability to experience balance and harmony in your health. The focus of my assessment of your health is on identifying patterns of strength and weakness and, depending on your wishes, I will make recommendations that may include nutrition, herbs, supplements, counseling and lifestyle to support those areas. My recommendation may also include suggestions for creating physical, emotional, mental and/or spiritual balance. Many therapies, including herbs, work over time. However, at any time you don't feel happy with any recommendations, or if you feel you might be having an adverse reaction, please let me know and we will work to find something that you are comfortable with.

I maintain a herbal apothecary to aid in this work. I dispense tinctures and teas as a convenience and to ensure clients are receiving specific, individualized herbal formulas. I order only high quality herbs, and many of my herbal formulas include wild herbs I have personally harvested and made into medicinal preparations by hand. Clients are not obligated to buy any products from my clinic and I encourage clients to purchase herbs and/or supplements wherever it is most convenient for them.

All information discussed will be held strictly confidential unless by expressed consent of the client.

It is important to me that you have a good understanding of this and any information we discuss, no matter how many questions you need to ask. Please feel free to clarify anything that may be confusing. Please sign to indicate you have read and understood this information:

Name (Signature) _____ Date: _____

Name (Print): _____