The Care Companion Program (CCP) created by Noora Health with medical input by Stanford Vascular Surgery provides content and services meant for health education and are a source of information only. Going through any portion of CCP, therefore does NOT take the place of medical advice, diagnosis, or treatment, and should not be considered any of the above. You should always speak to your doctor or other qualified healthcare provider about professional medical advice for diagnosis and treatment as it pertains to you or your loved ones’ health specifically. The content and services on this application are not guaranteed to be safe, appropriate, or effective for you specifically, since CCP provides only general information on the most common issues, and you or your loved ones’ medical condition may be different. Please discuss with your healthcare provider about any personal health or medical questions or concerns. If you have or suspect that you have a medical problem or condition, please contact a qualified health care professional. If you are in the United States and are experiencing a medical emergency, please call 911 or call for emergency medical help on the nearest telephone.

I recognize that there are certain inherent risks associated with performing the skills taught by CCP, and I assume full responsibility for personal injury, permanent, temporary, total or partial disability, disfigurement, paralysis, and any other losses or damages to person or property or death, to myself, family members, friends and any other agents or representatives, and further release and discharge Noora Health from any and all liabilities, claims, demands, causes of action or losses of any kind or nature, past, present or future, direct or consequential that I may hereafter have, arising out of my use of CCP.

I agree and acknowledge that I am under no pressure or duress to sign this agreement and that I have been given a reasonable opportunity to review it before signing. I further agree and acknowledge that I had the opportunity to have my own legal counsel review this agreement if I so desire.

By checking the box below, I agree to this Disclaimer & Terms of Service.

□ I Agree to this Disclaimer & Terms of Service