

Advanced Functional Testing & Genomics: Informed Consent & Utility Worksheet

Client Name: _____ Date: ____ Proposed Test(s): _____

Section 1: Clinical Utility Framework (The "\$500 Rule")

Before proceeding, we must ensure this test provides actionable value and isn't an unnecessary financial burden.

- **Test Category:**
 - ☐ Foundational (CBC, CMP, Thyroid) - *High utility, essential for safety.*
 - ☐ Advanced Functional (GI Map, DUTCH, etc.) - *High utility, changes the protocol.*
 - ☐ Boutique/Experimental (Rare SNPs, Longevity) - *Low proven utility, "nice to know."*
- **Actionability:** If this test comes back positive/high, will it fundamentally change your current supplement, diet, or lifestyle plan?
 - ☐ Yes ☐ No
- **Financial Stewardship:** Is the cost of this test (\$____) manageable without causing significant stress that might hinder your healing process?
 - ☐ Yes ☐ No

Section 2: Data Privacy & Laboratory Disclosure

Your biological data is your most private asset. Based on my due diligence of the lab:

- **Data Ownership:** Does the lab allow you to request the destruction of your physical sample after testing? ☐ Yes ☐ No
- **Third-Party Sharing:** Does this lab sell de-identified data to external research or insurance groups? ☐ Yes ☐ No
- **Security:** Does the lab utilize bank-level encryption for your results portal? ☐ Yes ☐ No

Section 3: Genetic Anticipatory Guidance (For SNP/Genomic Testing)

Genetics is a roadmap of tendencies, not a guarantee of destiny.

- **Epigenetic Context:** I understand that these results show **potential predispositions**, not a diagnosis. My lifestyle, environment, and nutrition (epigenetics) determine how these genes are expressed. [] Initial: _
- **Psychological Readiness:** On a scale of 1–10 (1 being calm, 10 being highly anxious), how do you feel about receiving information regarding your genetic predispositions?
Score: _
- **DTC Disclaimer:** (If using 23andMe/Ancestry data) I understand that Direct-to-Consumer data is for **educational exploration only** and may have a 40% false-positive rate. Any critical findings must be confirmed by a clinical-grade lab. [] Initial: _

Section 4: Protocol for Incidental Findings

Functional tests may occasionally reveal markers outside the scope of health coaching.

- **The Referral Bridge:** In the event of an "incidental finding" (e.g., markers suggesting internal bleeding or metabolic pathology), I understand my practitioner will:
 1. **Not** provide a medical diagnosis.
 2. Provide an **Urgent Referral** to a Primary Care Physician or Specialist for a diagnostic workup.
- **Client Agreement:** I agree to follow up with a licensed medical professional should any findings fall outside the scope of this coaching functional-wellness program. [] Initial: _

Practitioner Observations & Reflection:

To be filled out by the practitioner after the discussion.

Clinical Justification for Test:

Client's Primary Concern/Anxiety Level Regarding Results:

Next Steps:

- [] Client to review Lab Privacy Policy (attached).
- [] Proceed with ordering test.
- [] Re-evaluate testing priority in _ weeks.

Client Signature: _____ **Date:** __ **Practitioner Signature:** _____ **Date:** _____
