

Form Instructions - Specimen Collection - Mailing

If remote energetic analysis of body specimens is for more than one member of the family, please be sure each member follows the instructions separately.

HUNS -

Before collecting body samples, please get four (4) small Snack Ziploc bags and adhere a sticky label on each as follows:

HAIR - Your name, DOB, gender, and collection Date

URINE - Your name, DOB, gender, and collection Date

NAILS - Your name, DOB, gender, and collection Date

SALIVA - Your name, DOB, gender, and collection Date

Get a paper cup and two Q-tips for the urine collection. You also need two Q-tips for the saliva collection.

Hair Collection - Cut a small clip of hair at the root of neck area. If no hair, other body hair is acceptable. Hair collected from hair brushing is OK too. Place collected hair in labeled HAIR bag and seal.

Urine Collection - First urine elimination after 3:00 AM. Collect small amount in paper cup. Dip Q-tips in it and place in URINE bag and immediately seal * tightly.

Nail Collection - Clip some fingernails or toenails, place in the NAILS bag and seal.

Saliva Collection - First thing in the morning, before eating, drinking, or brushing teeth, swab the inside of your mouth with the two Q-Tips. Place these in the SALIVA bag and immediately seal * tightly.

* To eliminate unpleasant odors emitting from open bags with URINE and SALIVA, please be sure these two bags are sealed tightly. If either saliva or urine gets on the outside of the snack bag, rinse outside of bags and dry well. Thank you for your consideration.

Forms -

Please print and complete the following forms:

1-OHP **Health** Questionnaire - signed

2-Notice of Understanding & **Agreement** - signed

3-**Check** to pay energetic analysis - \$125 – Cost of remedies is additional

If paying by Credit Card, call me direct to fulfill the transaction by phone prior to the assessment. DO NOT email you Credit Card # information. I honor M/C, Visa or AMEX.

In the **Health** form be sure to list all medications and what these are for, and any supplements. List any invasive therapies (IV's) with administration details per week/month, and what is addressing. Provide information on recommended exposure therapies indicating intensity and/or duration, and how many sessions per week/month. Complete in the back of the form or add a sheet.

Mailing –

In mailing envelope include:

- 1-Health
- 2-Agreement
- 3- **Body Specimens**
- 4-Check

Forms **ONLY** needed with first samples. These become **OHP**'s patient's files.

In mailing envelope place specimen bags and three items above. Apply appropriate postage and mail to:

OPTIMAL HEALING PATHWAYS (OHP)
87 Harmony Grove Pkwy
Acworth, GA 30101

Attention – Very Important - Mail body specimens, forms, and payment for each member of the family in a **SEPARATE** envelope. If all family members are mailed in same envelop and gets lost, the entire process for each family member needs to be started again.

Body Specimens Shelf Life –

Body specimens are good for up to 7 days after collection. So be sure to mail on the same day of collection.