



HBOT (Soft Chamber) Rental Agreement Letter

Dear Family,

We are excited that you will be renting a Hyperbaric Oxygen Chamber (HBOT) from Center for Integrative Health. The use of HBOT has been very encouraging and we hope you see great benefits for you or your child. The following letter outlines the terms of the rental agreement. Following the rules below will help ensure safety and proper care of the chamber. If you are unsure of the following rules please contact our office for further explanation. If you are not willing to follow the rules please contact our office immediately so we can cancel your rental order. Because of scheduling concerns we must have one week notice if you will be canceling/rescheduling your rental month (please refer to #3).

The rules of the HBOT rental are as follows:

1. The Hyperbaric Chamber is a piece of medical equipment that _____ may use (if this person is a child, he/she must use the chamber with an adult caregiver).
2. Because of medical rules and regulations only _____ and a caregiver may use the Hyperbaric Chamber. We encourage you to strongly follow this rule to protect yourself from any unnecessary liability.
3. Rental fee and all fees associated with the rental must be paid in full when the chamber is picked up. The four week rental fee is \$2,000.00. To guarantee your rental a non-refundable deposit of \$250.00 is required at the time of your reservation. This deposit will be applied to your total monthly fee.
Patient Name: _____ Date of pick-up: _____
4. The length of rental time: four calendar weeks commencing on the day the chamber is picked up.



5. Any person using the chamber aside from the person mentioned here _____, must have medical clearance from their physician(s) and assume full responsibility for its use.
6. Equipment must be brought back the day your rental time expires (by 12 noon unless otherwise agreed upon). Date of drop off: _____
7. You will be responsible for any damage done to the chamber or oxygen concentrator. Upon return, the chamber and all components will be inspected for any damage and to insure all parts are in fine working order.
8. The chamber must be returned clean; free of any visible dirt and hair. Please clean the inside of the chamber with a non-toxic "green" all purpose cleaner and soft rag. The chamber will be inspected upon return and if the interior does not meet cleanliness standards there will be an additional \$50-\$100 (at our discretion, based on condition of chamber) cleaning fee charged to you. The removable mattress cover must be laundered as well.

If you agree to these rules please sign below and fax back to our office at (203) 834-2831 or return it via mail.

Executed this _____ day of _____ 20____

Parent (sign and print name)

Parent (sign and print name)

If patient is an adult, please sign and print name here