

Consent for Treatment at Yew Acupuncture & Sound Sanctuary (YASS)

Yew Acupuncture & Sound Sanctuary has multiple treatment modalities. Your treatment may include any or all of the following general modalities: East Asian medicine (Acupuncture), Physical Medicine (Chinese massage, craniosacral therapy, visceral manipulation), Harmonic medicine (sound healing) and Nutritional Counseling. Our East Asian practitioners are licensed in the State of Washington and have completed graduate/doctorate level training and national board certification.

Practitioner(s) at Yew Acupuncture & Sound Sanctuary may perform any of the following specific procedures as necessary to facilitate assessment of condition, TCM diagnosis & treatment, or otherwise address health concerns:

- **General Diagnostic Procedures:** including but not limited to general physical exams, neurological and musculoskeletal assessments
- **Herbs/Natural Medicines:** prescribing various therapeutic substances including plant, mineral and animal materials. Substances may be given in the form of teas, pills, tinctures (may contain alcohol); topical creams, pastes, plasters, washes; suppositories or other forms. Homeopathic remedies and flower essences, often highly diluted naturally occurring substances, may also be used.
- **Dietary Advice and Therapeutic Nutrition:** includes the use of foods, TCM nutrition, diet plans or nutritional supplements for treatment.
- **Soft Tissue Manipulation** includes the use of Chinese massage (Tuina), muscle energy stretching or visceral manipulation, and craniosacral therapy.
- **Electromagnetic and Thermal Therapies** includes transcutaneous electrical stimulation, microcurrent stimulation, ion pumping cords (ICP), diathermy and infrared therapies (TDP lamp, table warmer, infrared biomat), moxibustion (direct or indirect burning of Chinese mugwort (*Artemisia* species) on the body), and hydrotherapies (hot or cold stimulation using water)
- **Acupuncture:** insertion of sterilized needles or lancets at specific points on body
- **Topical Treatments and Prepping:** includes cupping – a technique using glass cups on the skin surface with usually a heat-created vacuum; and Gua Sha – rubbing on body area with a blunt, round tool. Topical use of massage oil or pain relief products. Also harmonic tools (such as weighted tuning forks and Tibetan bowls) as well as placing stone/crystals and energetic tools on the body.

Potential Risks: While not common, harm can occur from any therapy. Some examples can include but are not limited to: pain, discomfort, blistering, discolorations, infection, or burns from topical procedures, heat or frictional therapies, electromagnetic and hydrotherapies; loss of consciousness or deep tissue injury from needle insertions or needle breakage; allergic reactions to prescribed herbs or supplements; soft tissue or bone injury from physical manipulations; and aggravation of pre-existing symptoms. In addition, **the patient must inform the practitioner if the patient has a severe bleeding disorder or pacemaker prior to treatment.**

Potential benefits: Restoration of health and the body's maximal functional capacity, relief of pain and symptoms of disease, assistance in injury and disease recovery, and prevention of disease or its progression.

Notice to Pregnant Women: All female patients must alert the doctor if they know or suspect that they are pregnant, since some of the therapies used could present a risk to the pregnancy. Labor-stimulating techniques (including labor stimulating acupuncture points) or any labor-inducing substances will not be used unless the treatment is specifically for the induction of labor. A treatment intended to induce labor requires a letter from a primary care provider authorizing or recommending.

By signing below, I (or my authorized representative on my behalf) authorize Yew Acupuncture & Sound Sanctuary and their staff(s) to conduct any of the methods, procedures and therapeutic approaches listed above. I understand that I may ask questions regarding my treatment before signing this form and that I am free to withdraw my consent and to discontinue participation in these procedures at any time. With this knowledge, I voluntarily consent to the above procedures, realizing that no guarantees have been given to me by Yew Acupuncture & Sound Sanctuary or its practitioner(s) and staff(s) regarding cure or improvement of my condition(s). I understand that a record will be kept of the health services provided to me. This record will be kept confidential and will not be released to others unless so directed by me or my representative or otherwise permitted or required by law. I understand that I have the right to review my record and obtain a copy of my record upon request and that obtaining a copy of my record may require payment of a fee.

x _____

Patient/Guardian's Name (print)

Signature

Date