

## **Charlotte Acupuncture Therapy Clinic**

## **Informed Consent Form**



Acupuncture is performed by insertion of very fine, sterile, disposable, one time use needles through the skin at certain points near the surface of the body in an attempt to treat pain, disease, or other dysfunctions. The needles are then left in the body for a period of time, during which the patient is requested to lie quietly and relax. Additional adjunct therapies may be performed during a treatment. These methods may include, but are not limited to

- Acupressure
- Cupping, which uses heated class cups to create suction on the skin
- Electrical stimulation of the needles
- Tui-Na (Chinese Massage)
- Gua-Sha, a bruising on the skin using a smooth-edged instrument
- Application of heat through moxibastion (using herb mugwort)
- Chinese herbal supplementation in the form of teas, liniments, pills, or plasters
- Application of magnets and/or metallic pallets
- Lifestyle counseling

Acupuncturist will describe each therapy. You may ask any questions concerning these therapies prior to their administration. During the treatment acupuncturist will ask you to report any sensations that you may experience. Anything considered unusual or of concern should be reported immediately to the acupuncturist on duty.

Many patients experience feeling of relaxation, increase of energy, or alertness. Some patients undergo the "healing crises", which means initial worsening of symptoms.

Generally acupuncture is a very safe method of treatment and does not produce serious side effects. However, the patient has to report any unusual or strong responses to the treatments immediately.

The list of rare side effects includes the following:

- Bruising. Small bruises may occur at the site of needle insertion. This is more prevalent in the
  individuals taking blood-thinning or some anti-inflammatory medications. Cupping may leave
  circular reddish-purplish areas on the skin. These type of bruises do not require treatment and
  disappear within days.
- Discomfort. Discomfort may persist at the insertion site. Usually it is temporary and should disappear quickly, within a few days. Very rarely it may linger for a few weeks.
- Dizziness/Fainting. This reaction may be very brief when the patient gets up from the treatment table or chair, and usually it should not require any special attention.



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- Burns. On rare occasions the ignited herb may touch the skin or some ash may fall on the bare skin producing a small burn. Usually small burns do not need any special treatment. However, if this happens the patient should report it to the acupuncturist.
- Allergic reactions. On extremely rare occasions the external or internal application of herbal supplements may cause allergic reactions which should resolve in hours or days.
- Digestive distress. On rare occasions the external or internal application of herbal supplements can cause mild to moderate digestive upset which resolves in hours or days.

The side effects can occur immediately after treatment, or may be noticed a few hours later. The patients are encouraged to report any unusual changes or feelings to their practitioner at their next visit. Please call the acupuncturist with any concerns after your treatment.

Generally acupuncture treatments are beneficial during pregnancy. However, the patient must notify the acupuncturist should they be pregnant or if they are in the process of trying to get pregnant, so that the practitioner can avoid points and herbs that are not recommended during pregnancy.

Extremely rare risks include bent, broken or stuck needles, nerve damage, organ puncture and infection.

### **Patient Statement:**

By voluntary signing below, I show that I have received and carefully read, or had read to me, the information included in this document concerning the possible effects of acupuncture and herbal supplements. Acupuncture therapy, herbal supplements and their possible side effects were satisfactory explained to me. My questions were thoroughly and completely answered.

After careful consideration, I agree to receive acupuncture treatments from the Charlotte Acupuncture Therapy Clinic. I also understand that I have the right refuse or discontinue treatment at any time, although such a refusal may affect the anticipated results.

I intend this consent form to cover the entire course of treatment for my present condition and for any future conditions(s) for which I seek treatment.

Patient (or legal guardian) Signature	Date	
Practitioner Signature	Date	