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## Informed Consent

### Information for Patients

Nature of Treatment: Your treatment may include acupuncture, acupressure, moxibustion (direct or indirect application of heat to acupuncture points or needles), cupping (glass cups placed on skin with a vacuum created by heat or other device), electric or magnetic stimulation, Tui na (Chinese massage), Gua Sha (dermal friction), infra-red (heat lamps), sonopuncture (sound stimulation), Chinese herbal medicine, bleeding, bleeding cupping, therapeutic exercises and dietary counseling based on the fundamentals of Chinese medicine.

Purpose of Treatment: The purpose of the treatment is to resolve your complaint, i.e. the reason you are seeking treatment. Acupuncture is a health care service that is based on an Oriental system of medical theory. Diagnosis and treatment, based on these theories are used to promote health and treat organic or functional disorders.

Benefit of Treatment: Acupuncture and Oriental Medicine procedures have been used effectively to treat disease for hundreds of years. The World Health organization lists 43 conditions, which may effectively be treated by Chinese medical methods. These include muscular-skeletal injuries, digestive disorders, respiratory diseases, women's health issues, etc. We cannot guarantee the outcome of any course of treatment.

Risks of Treatment: Acupuncture and Oriental medicine have been shown to be generally safe method of treatment, but it is possible for some people to experience some potential side effects:

- Discomfort during and after the insertion of a needle (numbness or tingling near the needling sites that may last up to a few days).
- "Needle sickness" involving dizziness, fainting or nausea.
- Localized, minor bruising or swelling
- Minor burns with the use of Moxa
- Possible, temporary aggravation of symptoms that existed prior to treatment
- A broken needle (rare with the use of disposable needles and a properly trained acupuncturist)
- Gastrointestinal upset (nausea, gas, stomach ache, vomiting, diarrhea) and other reactions (headache, rashes, hives and tingling of the tongue) may occur with the use of Chinese herbs (if this occurs, please consult your practitioner so that your formula can be modified)

Unusual risks or acupuncture include spontaneous miscarriage, nerve damage, organ puncture (including lung puncture). Infection is another possible risk, although the clinic uses sterile disposable needles and maintains a clean and safe environment. These risks are effectively minimized through extensive and continuing training of your practitioner. Please notify your practitioner if you have any adverse effect from treatment

Special Situations: Please inform us if you have severe bleeding disorders, diabetes, lymphedema, infectious disease such as HIV / AIDS, hepatitis, tuberculosis, or if you are wearing a pacemaker or other electronic medical device. Some herbs and acupuncture points are contra-indicated during pregnancy. Please notify us if you might be pregnant.

Use of Disposable Needles: To reduce the possibility of infection from acupuncture, all needles are pre-sterilized, one-time-use needles made of surgical stainless steel needles. After each treatment they are disposed of as medical waste, needles are never reused. Additionally, your acupuncturist has had training in Clean Needle Technique and Universal Precautions.

Requirement of Washington State Law: Washington State Law does not permit acupuncturists to treat certain disorders without the consultation of a physician, i.e. a medical doctor (M.D.)

- Cardiac conditions including uncontrolled hypertension
- Acute abdominal symptoms
- Acute undiagnosed neurological changes
- Unexplained weight loss or gain in excess of 15% of body weight within a 3 month period
- Suspected bone fracture or dislocation
- Suspected systemic infection
- Any serious undiagnosed hemorrhagic disorder
- Acute respiratory distress (without previous history or diagnosis)

I do not expect the acupuncturist to be able to anticipate and explain all possible risks and complications of treatment, and I wish to rely on the acupuncturist to exercise judgement during the course of treatment which the acupuncturist thinks is best at the time based upon the facts then known. I understand that results are not guaranteed. I understand that the acupuncturist is not providing Western (allopathic) medical care, and that I should look to my primary care practitioner (i.e. M.D. or N.D.) for those services and for routine check-ups.

I request and consent to the performance of acupuncture and the Oriental Medicine procedures. I understand that I am free to withdraw my consent and that I may stop treatment or any procedure at any time. I understand that my signature in this form indicates that I have read and understand the risks and benefits of acupuncture and other treatments. I have had an opportunity to ask questions and understand that if at any time I have any questions about this information, I should ask my acupuncturist. I, hereby release Wise Body Wellness / Marshall DeCouto L.Ac. from any and all liability that may occur in connection with the above-mentioned procedures, except for failure to perform the procedures with appropriate medical care.

Patient's Name \_\_\_\_\_

Patient's Signature \_\_\_\_\_ Date Signed \_\_\_\_\_

*To be completed by the patient's representative if the patient is a minor or is physically or legally incapacitated:*

Print Name of Patient \_\_\_\_\_

Print Name of Patient Representative \_\_\_\_\_

Signature of Patient Representative \_\_\_\_\_ Date \_\_\_\_\_

Relationship or Authority of Patient \_\_\_\_\_