

## THE TERMS AND CONDITIONS AND INFORMED CONSENT TO OSTEOPATHIC TREATMENT

Naturcare clinic offers various treatments such as Osteopathy, Acupuncture and Chinese herbs. Osteopathic treatment and Acupuncture will be performed by a qualified practitioner. The tailored herbal treatment will be prescribed by a TCM (Traditional Chinese Medicine) practitioner.

Acupuncture involves the insertion of fine, sterile needles into specific points on the skin. Individuals react to Acupuncture in varying ways, depending on whether they are what is known as a 'strong reactor' or not. In general Acupuncture may make patients feel slightly drowsy or relaxed. This can occur during the session for the strong reactors, or later the same day. Some people may not experience it at all. This does not mean that Acupuncture won't work. Many patients sleep very heavily on the same night of their first treatment.

Based on the research evidence in the UK, the incidence of adverse effects associated with acupuncture is very low. The following are possible adverse effects:

- Bleeding and Bruising (3%)
- Mild aggravation of symptoms (3% of which 70-85% show subsequent improvement)
- Mild Pain at the needle site (1%)
- Drowsiness (1%), Dizziness (0.6%), and Feeling faint (0.3%)
- Nausea (0.3%)
- Stuck or bent needle (0.1%)
- Headache (0.1%)
- Allergy or infection (up to 0.2%)
- Pneumothorax(0.0002%/ less than 2 per 1 million)

Furthermore, your practitioner needs to know (Please circle a answer for each question) :

- If you are pregnant or there is a possibility that you may be pregnant? Yes/No
- If you have a pacemaker or any other electrical implant? Yes/No
- If you have a bleeding disorder? Yes/No
- If you are taking anti-coagulants (blood thinners)? Yes/No
- If you have any risk of infection? Yes/No
- If you have an unstable heart condition? Yes/No
- If you have poorly controlled epilepsy or diabetes? Yes/No
- If you have a known stainless steel or nickel allergy? Yes/No
- If you have a severe phobia of needles? Yes/No

In addition, if there are particular risks that apply in your case, your practitioner will discuss these with you. If you experience any of the above or notice anything unusual about your health following your treatment then you should contact your practitioners or GP straight away.

I confirm I have read, understood and have had the opportunity to ask questions related to the information on this form. Specifically I understand what the treatment is likely to involve, the intended benefits and possible adverse effects, therefore I give consent to having acupuncture treatment. I understand I can withdraw from the treatment at any time. I agree not to disturb the needles during the treatment period and will ask for assistance if I have any concern.

*This clinic has a 24 hour cancellation policy that applies to all appointments. Failure to provide 24 hours notice when changing or cancelling appointment times and missed appointments will result in being charged the 50% of the full appointment fee. **Please understand that by not advising us that you cannot attend means that someone else who needs treatment may not be able to have it.** It is expected that you will pay for each appointment at the end of your session. At the end of your treatment, you may be required to fill in the patient feedback form.*

Patient's Name \_\_\_\_\_ Patient's Signature \_\_\_\_\_ Date: \_\_\_\_\_