

Blue Creek

Consent to Treatment

I hereby give consent for myself, or my dependent to be examined and or treated by the practitioners at Blue Creek. I understand that I am fully responsible for the payment of services rendered.

I understand that I can discuss the risks and benefits with my practitioner before signing, if I so choose. However, I do not expect my practitioner to be able to anticipate and explain all possible risks and complications of treatment. I rely on the practitioner to exercise his or her judgment in my best interest during the course of treatment, based upon the facts then known.

Regarding Acupuncture Treatments

I understand that acupuncture, moxibustion, electrical stimulation, cupping and pricking are all safe methods of treatment. Potential risks include temporary bruising, swelling, bleeding, numbness and tingling, and soreness at the needling site that may last a few days. Unusual risks of acupuncture include dizziness, fainting or nerve damage. Infection is possible, though the clinic uses alcohol and sterile disposable needles to maintain a safe and clean environment. Potential risks of moxibustion health therapy are burns, blistering, or scarring. Temporary bruising or redness lasting a few days is a common side effect of cupping and gua sha, or spooning.

I fully understand that there is no implied or stated guarantee of success or effectiveness of a specific treatment or series of treatments. If you have any questions or concerns regarding your care or the after effects, please consult with your practitioner(s) at Blue Creek.

Initial

Mandatory Disclosure

I have read and understand the mandatory disclosures for Blue Creek's licensed acupuncturists.

Initial

Privacy Practices Acknowledgement

I understand that my personal health information will not be shared with any agencies or individuals without my written consent.

Initial

Arrival Policy

New patients, please note that you will need to fill out initial paperwork prior to your treatment(s). All patients are encouraged to arrive 10 – 15 minutes prior to your treatment(s) to ease into your Blue Creek experience. If you are running late, a phone call is always appreciated. Your arrival time will determine the length of your treatment time, which will end as scheduled so as not to interrupt the next scheduled treatment.

Initial

No Show/Cancellation Policy

Our goal is to accommodate all of our patients' health care needs and schedules to the best of our ability. Therefore, we maintain a 24-hour cancellation policy to ensure all available appointment times can be utilized for patient care. If you fail to notify us of a cancellation, or notify us with less than 24 hours' notice, you will receive a written warning via email or US mail. This will include a signed statement that you have

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reviewed and understand our cancellation policy. We will include a copy of your signed consent form, reminding you of this cancellation policy. For a second offense, you will be charged 1/2 the scheduled treatment fee. If three appointments are missed with improper notice, you will be placed on our 'same day scheduling' list and will not be allowed to pre-book any appointments.

Please note that "reminder" calls are made by our practice as a courtesy to our patient families. Failure to receive a reminder call does not eliminate the No Show/Cancellation Policy requirements.

Initial

Late Policy

If you are more than fifteen minutes late for an appointment you will be considered a "No-Show" and may be asked to reschedule your appointment (if we do not have enough time to service you). In addition, our "No-Show" policy will be instituted. If you are more than five minutes late for an appointment, we will make our best effort to see you in a timely fashion; however, patients who are on time for their appointments will be given priority and late patients will be seen only if time permits. You may also request to reschedule for an appointment later in the day, and we will do our best to accommodate your needs.

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Community Room

Due to the nature of scheduling in the Community Room, if you arrive more than 10 minutes late for your treatment, you will have to be rescheduled with a fee of \$17.50 applied to your account. If you are able to be rescheduled for the same day, this fee will be waived.

Initial

Return Policy

We will be happy to issue you a refund for all unopened products when accompanied by your *original receipt within 30 days*. We stand by the quality of our products! Please open all product(s) immediately after purchase. If you notice anything 'unusual,' we will exchange the opened product(s) within 48 hours from time of purchase.

Special order items must be paid in full before order will be placed. Image, Eminence, Mayway, and Young Living special order items are final sale and may not be returned. Comphy special order items may be returned with an additional shipping and restocking cost.

In signing this form, I acknowledge and inherent risks, and give my consent for treatment, payment and healthcare operations received, incurred or carried out at this practice.

Printed name _____

Patient Signature _____

Date _____

(Or legal guardian if patient is under the age of 18)