PATIENT INFORMATION AND CONSENT FORM

WHAT IS ACUPUNCTURE?

Acupuncture is a form of therapy in which fine needles are inserted into specific points on the body.

WHAT IS THE ROLE OF ACUPUNCTURIST IN GEORGIA?

The Georgia Code 360-6-.16 states that an acupuncturist is not licensed to practice medicine in the State of Georgia. Accordingly, an acupuncturist is not able to make a medical diagnosis of the person's disease. Therefore, if you are seeking to obtain a medical diagnosis, then you should see a licensed physician and seek medical advice from a licensed physician.

DOES ACUPUNCTURE HAVE SIDE EFFECTS?

Acupuncture is generally very safe.

- Serious side effects are rare - less than one per 10,000 treatments
- Drowsiness occurs after treatment in a small number of patients
- Minor bleeding or bruising occurs after acupuncture in about 3% of treatments.
- Pain during treatment occurs in about 1% of treatments.
- Symptoms can get worse after treatment (less than 3% of patients). You should tell your acupuncturist about this, but it is usually a good sign.
- Fainting can occur in certain patients, particularly at the first treatment.

In addition, if there are particular risks that apply in your case, your practitioner will discuss these with you.

IS THERE ANYTHING YOUR PRACTITIONER NEEDS TO KNOW?

- If you have ever experienced a seizure, dizziness, or fainting episode
- If you have a pacemaker or any other electrical implants
- If you have a bleeding disorder
- If you are taking anti-coagulants or any other medications
- If you have damaged heart valves or have any other particular risk of infection

SINGLE-USE, STERILE, DISPOSABLE NEEDLES ARE USED BY ACUPUNCTURISTS.

STATEMENT OF CONSENT

I am seeking to be treated with acupuncture for the condition of _____. I confirm that I have read and understood the above information and I consent to having acupuncture treatment. I understand that I can refuse treatment at any time.

Signature _____

Print name in full _____

Date _____

_____ _____

Practitioner Signature Date

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PATIENT INFORMATION LEAFLET

(Please read this information carefully and ask your practitioner if there is anything that you do not understand.)

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