



Informed Consent

Acupuncture is an ancient healing art. People have recognized and relied on its simplicity and effectiveness for thousands of years. In a way, acupuncture can be described as constructive damage; it causes people a little pain in order to help much bigger problems. The statements below will assist your understanding and participation in this process.

Acupuncture is a technique utilizing tiny stainless steel needles inserted at specific points in the body in order to correct various ailments. The location of the application of the needles and the depth of their insertion is determined by the nature of the problem. I understand that the application of these needles may be accompanied by some painful sensations. Although the needles are sterile and disposable I understand there is a very slight possibility that a minor inflammation, bruise, or infection may occur at the site of insertion. In this event, any problem that arises from the acupuncture treatment can easily be handled by the acupuncturist and need not be a cause of concern.

On a few occasions electrical stimulation of the needles may be used. This technique uses a small battery powered stimulator attached by wire to the ends of the needles. A slight vibratory sensation may be felt during the use of this stimulator.

Acupuncture therapy also makes use of the application of indirect heat supplied by burning the herb Artemisia Vulgaris or Mugwort. This process is known as moxibustion. I understand this treatment may become uncomfortable and could temporarily leave a small blister or scab on the surface of the skin whereby the internal problem is purposely attracted to the outside.

The principles and methods of Chinese Medicine are different from those of conventional Western Medicine. Confusion and misunderstanding can result if Chinese Medicine is judged from the standpoint of Western Medicine. In the event of any controversy between the patient and the acupuncturist, persons who have expertise in the area of Chinese Medicine and Healing Practices shall review the case.

I understand that there are no guaranteed results for facial acupuncture. There can be bruises (hematoma), puffiness, redness, blood, pain and other symptoms at the site of the needles on the face or the body during or after treatment.

I hereby certify that I have read this entire form and I consent to the provisions described above. I completely understand all these ramifications and freely agree to undergo these treatments.

Patient's Signature _____ Date _____

Practitioner's Signature _____ Date _____

If the patient is a minor or incompetent, the parent or legal guardian should sign below. If Possible, the patient should also sign below.

Signature of Parent or Legal Guardian _____ Date _____

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