



Patient Rights

Your Rights as a Patient: The Commonwealth of Virginia Board of Medicine regulates the practice of Oriental Medicine; all practitioners are required to be licensed through this system. You are entitled to receive information about the methods of care, if known, and fee structure. You have the right to know the risks, as well as the benefits, of any therapy, procedure performed, medicinal agent, healing supplement, herb or any other recommendations made by a health care practitioner. All invasive procedures require documented informed consent. You are also entitled to information regarding the health care provider's degrees, credentials and licenses. You have the right to seek a second opinion from another practitioner or terminate care at any time. Understand that VA law states, "No practitioner may guarantee the outcome or cure". You should know that in a professional relationship, sexual intimacy is never appropriate and should be reported to your state Medial Grievance Board. It is important that you understand that information provided by you during care is confidential and except in certain circumstances of which you should be informed.

Confidentiality: Matters regarding your health care will be kept confidential except in the following circumstances: you sign a release from giving permission to release information to a specific individual or agency; child abuse; patient or client is in imminent danger to self or others; subpoena of records. In addition, it may be appropriate to consult your primary care medical doctor, particularly in circumstance where a medical doctor is monitoring physical symptoms or a change in medication may be needed. *In this circumstance, your signature below constitutes your giving permission for such consultations.*

Fee and Payments:

Initial Pediatric Appointment	\$50
Follow Up Pediatric Appointment	\$40
Initial Adult Appointment	\$80
Sliding Scale Fees for Follow Up Appointments Based on total household income:	
Under - \$30,000	\$50
\$35,000 - \$40,000	\$55
\$40,000 - \$45,000	\$60
\$45,000 - \$50,000	\$65
\$55,000 - Above	\$70
Facial Acupuncture	\$125/\$100
NADA - Waiting Room Ear Acupuncture	\$10

Payments are due at the time of service. Returned checks will incur a \$30 fee. Since I have reserved our appointment time for you, it is my policy to charge a 50% cancellation fee for cancellations received less than 24 hours notice except in cases of emergencies. If you have financial concerns, please discuss them with me prior to that becoming an obstacle to your healing progress – I am happy to work out arrangements to make this work within your personal budget. Please understand that this office does not bill to any insurance company and that the responsibility falls upon you to collect from any company that will reimburse for services rendered here.

Continuity of Care/ Termination of Care: Your responsibility in a therapeutic relationship is to keep your appointments and follow through with guidance and recommendations that take reasonable steps toward a goal of health. It is always your right to terminate care at any time; however, I strongly encourage you to discuss this decision with me. I am delighted in your decision to better your health and am willing to discuss your progress and your status with you on an on-going basis. Please understand acupuncture works best as a cooperative process. Feel free to talk about your needs and concerns with me at any time.

I understand the above rights and responsibilities in the therapeutic relationship.

Printed Name

Signature

Date