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Informed Consent for Treatment

I hereby request and consent to the performance of acupuncture treatments and other procedures within the scope of practice of Chinese medicine, on me by Dr. Chase G. Hoseclaw Waters, DAOM, MTCM, L.Ac., and/or other licensed acupuncturist who now or in the future treat me while employed by, working or associated with or serving as back-up for him, whether signatories to this form or not. I authorize Dr. Chase G. Hoseclaw Waters, DAOM, MTCM, L.Ac. to perform the following therapies as necessary for my individual treatment:

Acupuncture: insertion of single-use, sterilized acupuncture needles through the skin and into tissues at different points throughout the body. Acupuncture seeks to harmonize physiological function, to change pain perception and to treat various disease and health conditions.

Cupping: a therapy implemented to lessen pain and address other symptoms, by placing glass, plastic or bamboo cups on the skin and creating a vacuum between the cups and the skin using heat or air.

Gua Sha: a technique that involves rubbing on a specific area of the body using a dull, rounded tool.

Herbs: these may be prescribed as teapills, capsules, granules (powdered mixture of Chinese herbs taken with hot water as a tea) or plasters. Herbs may be recommended for internal use or for external use as a plaster or poultice. Herbal formulas may contain mineral, shell and animal ingredients.

Moxa: indirect or direct burning of an herb over specific points on the body using a stick or other instrument.

Tuina: Chinese medical massage used to address many different conditions.

Nutritional counseling/supplement recommendations: based on whole foods diet, evidence-based research and Chinese medical theory

I recognize the possible risks and benefits of these therapies as follows:

Potential risks: Acupuncture is a safe therapy, but there are some possible side effects.

The patient may experience bruising, tingling, discomfort and pain close to the sites of needling or cupping that may last for several days. Nausea, lightheadedness or dizziness occasionally occur following treatment. It is best to eat a snack or light meal 1-2 hours prior to treatment, to avoid these symptoms. Gastrointestinal symptoms such as loose stools, bloating and other digestive symptoms may occur with acupuncture and/or ingesting Chinese herbs. Symptoms that were present before acupuncture treatment may occasionally become worse. Rare cases have been reported of fainting, infection and scarring or blistering of the skin. Extremely rare cases have been reported of spontaneous miscarriage and pneumothorax. Dr. Chase G. Hoseclaw Waters, DAOM, MTCM, L.Ac. is a highly-trained acupuncturist and such rare side effects are extremely unlikely to occur. He is certified in Clean Needle technique, uses single-use, sterile acupuncture needles and maintains a clean work environment.

Potential benefits: non-pharmaceutical improvement in symptoms leading to improved quality of life. Patients often report deep relaxation, better quality sleep, improved energy, digestion and immune function, more balanced emotions, regularized menstrual cycle, clearer thinking, less stress and less pain with regular acupuncture treatments.

For pregnant women: We only utilize labor-stimulating acupuncture points if the treatment is for labor induction. We require all female patients to let us know if they are, or might be, pregnant. Acupuncture is very safe for women during pregnancy and can alleviate many common pregnancy-related ailments such as nausea, heartburn, headaches, fatigue, insomnia and musculoskeletal pain, amongst other symptoms. Some Chinese herbs are not appropriate for women to take during pregnancy.

With this information provided, I voluntarily consent to the therapies outlined above. I understand that I have been given no guarantees by Dr. Chase G. Hoseclaw Waters, DAOM, MTCM, L.Ac. that my health concerns will improve or resolve. I do not expect the acupuncturist to anticipate or discuss all possible risks or complications of treatment. I choose to rely on the acupuncturist to exercise his best clinical judgment throughout the course of my treatment. I realize that I may discontinue my treatment at this clinic at any time.

I have read (or had read to me) the above consent. I understand that Dr. Chase G. Hoseclaw Waters, DAOM, MTCM, L.Ac. will respond to the best of his ability to any questions I may have regarding this consent form.

Patient/responsible party name (PRINT)

Patient/responsible party signature

Relationship to patient (if applicable)

Date