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# **Consent Form: Agreement to Treatment**

Please read this form carefully, and sign if you are happy to give consent to treatment. Should you be unsure about any aspects of this form, please talk to me, and ask any questions that you may have.

#### Acupuncture and Moxibustion

Acupuncture involves the use of fine, single use, sterile needles that are inserted into specific points of the body. These needles are left in for the duration of the treatment, and are stimulated to achieve sensation. Moxibustion involves the burning of the herb 'mugwort', which is held close to the body by the practitioner, to introduce warmth to the area.

#### Tui na - Chinese medical massage

Tui na uses hands on massage techniques either through clothing, or using oil as a massage base. This massage is relaxing yet stimulating the natural healing mechanisms. It is fantastic at breaking up blockages within the body. It softens tense muscles, mobilises joints and tendons and gets the blood and lymph moving.

#### Cupping

Cupping therapy is a form of alternative medicine in which special cups are put on skin for 5-15 minutes to create suction. The goal of this is to improve circulation, ease pain and inflammation, and achieve relaxation.

#### Gua sha

Gua sha is a healing massage therapy that uses a smooth edged tool to repeatedly scrape an area of lubricated skin.

#### **Safety of Treatments**

Acupuncture, tui na, cupping and gua sha are generally very safe. Serious side effects are very rare. However, please be aware of the following:

- Certain examination or treatment procedures that form a normal part of acupuncture, massage, gua sha and cupping are invasive in nature and involve physical contact of the practitioner with the patient.
- Fainting can occur in certain patients, particularly at the first treatment.
- Patients may feel sedated or energised after treatment. If you are feeling drowsy, you are advised not to drive.
- Minor bleeding, bruising, and some aching can occur with acupuncture and are usually harmless.

## Zest Acupuncture

- Some bruising and aching can occur with cupping and gua sha because of the nature of the treatment. They are usually harmless and will resolve in three days, but may occasionally need a week time.
- Some aching can occur with massage and will usually resolve in 48h.
- Some symptoms can get temporarily worse after treatment and you should tell me about this, however this is usually a good sign.

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

## Safety of Needles

Only single use, sterile, disposable needles are used in this clinic.

#### Please answer the questions below:

Have you ever experienced a fit or a faint? Y / N Do you have a pacemaker or any other electrical implants? Y / N Do you have a bleeding disorder? Y / N if you are taking anti-coagulants or any other medication? Y / N Do you have damaged heart valves or any other particular risk of infection? Y / N

## Statement of Consent

I confirm that I have read and understood the above information and that I have been informed about the treatments.

I consent to having acupuncture, tui na, cupping, gua sha and moxibustion treatments. I understand that I can refuse treatment at any time.

Patient Name:

Patient Signature:

Date: \_\_\_\_\_

# Consent Form: Agreement to Commit to Treatment and Focus on Healing

I consent to commit to the treatment and change of my lifestyle if needed.

I consent to get better and heal.

I consent to make healing my focus, because I know that the more I heal, the more I will enjoy all areas of my life.

I consent to quit complaining and blaming in my life, knowing that they contribute to illness and make it harder to get well.

I consent to maximise praise and gratitude by expressing these toward myself, others, and the Divine.

I consent to minimise worrying about and focusing on negative things, including my health problems, while committing 100% to changing them.

I consent to appreciate all improvement in my health and well being.

I consent to notice all fear of getting well in myself, so I can happily and easily release it.

\_\_\_\_\_

Patient Name:

Patient Signature:

Date: \_\_\_\_\_