

***Alpine Valley Wellness Center, PC***  
**Acupuncture Consent**

I, the undersigned, authorize Gary Piscopo, ND, L.Ac., to perform the Chinese medical treatment know as Acupuncture. I understand that acupuncture involves the insertion of sterilized needles through the skin at specific points on the body. I also understand that the practice of acupuncture includes the use of techniques such as cupping, electro-acupuncture, moxibustion, and others outlined by the Washington State law for licensed acupuncturists. I understand that there is no implied or stated guarantee of success or effectiveness of a specific treatment or series of treatments.

Like all medical procedures, I recognize that acupuncture has potential risks and potential benefits. These risks and benefits are as follows:

**Potential Risks:** Many of the risks are similar to any insertion of a needle into a body, as in drawing blood or receiving an injection. These include light headedness, minor bruises or bleeding, a bent or broken needle at the site of insertion, possible infection, fainting, nausea, or weakness. There can also be discomfort at the site of insertion of the acupuncture needle. Additional risks include aggravation of symptoms existing prior to the acupuncture treatment and potential burns from the moxibustion technique.

**Potential Benefits:** Relief and resolution of the health concern being treated. Reduction and control of pain without the side effects of pharmaceutical intervention (i.e. addiction, mood changes, negative organ effects, etc.). Inducement of a greater sense of well being and an enhanced energetic balance leading to the prevention of further health concerns.

I hereby release Gary Piscopo, ND, L.Ac., from all liability in connection with the acupuncture and oriental medicine treatments I receive. I understand that I am free to discontinue treatment at any time.

I understand that, except in emergencies, I must give 24 hours notice of intent to cancel or reschedule my appointment. Failure to do so may result in a \$60 charge. I further understand that charges for services rendered are due at the time of service, unless other arrangements (including insurance billing) have previously been made.

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Signature of patient

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Date



*Washington State law required the Department of Health to develop a form for East Asian medicine practitioners to use to inform the public of the practitioners' scope of practice and qualifications. (18.06.130 RCW) This form must be given to each patient prior to or at the time of the initial patient visit. (246-803-300 WAC)*

## **Patient Notification of Qualifications and Scope of Practice**

East Asian medicine means a health care service using East Asian medicine diagnosis and treatment (such as acupuncture) to promote health and treat organic or functional disorders.

Dr. Piscopo's qualifications include the following education and license information:

Masters Degree in Acupuncture. Bastyr University, Seattle, WA  
June 1999

Doctorate of Naturopathic Medicine. Bastyr University, Seattle, WA  
June 1999

State of Washington Naturopathic Physician License # NT00000892  
State of Washington Licensed Acupuncturist License # AC00000577

The scope of practice for an East Asian medicine practitioner in the state of Washington includes the following:

- Acupuncture, including the use of acupuncture needles or lancets to directly or indirectly stimulate acupuncture points and meridians
- Use of electrical, mechanical, or magnetic devices to stimulate acupuncture points and meridians
- Moxibustion
- Acupressure
- Cupping
- Dermal friction technique;
- Infra-red
- Sonopuncture
- Laser puncture
- Point injection therapy (aquapuncture, biopuncture)
- Dietary advice and health education based on East Asian medical theory, including the recommendation and sale of herbs, vitamins, minerals, and dietary and nutritional supplements
- Breathing, relaxation, and East Asian exercise techniques
- Qi gong

- East Asian massage and Tui na, which is a method of East Asian bodywork, characterized by the kneading, pressing, rolling, shaking, and stretching of the body and does not include spinal manipulation; and
- Superficial heat and cold therapies.

Side effects may include, but are not limited to:

- Pain following treatment;
- Minor bruising;
- Infection;
- Needle sickness; and
- Broken needle.

The patient must inform the East Asian medicine practitioner if the patient has a severe bleeding disorder or pace maker prior to any treatment.