

PATIENT NOTIFICATION OF QUALIFICATIONS AND SCOPE OF PRACTICE

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

1. Qualifications include the following education and license information:

Avigail Cohen: Graduate of NW Institute of Acupuncture and Oriental Medicine L.Ac. - Masters of Acupuncture MA – 2003

Stephen Semptimphelter: Graduate of Pacific College of Oriental Medicine in Chicago – Masters of Science in Traditional Oriental Medicine (MSTOM) - 2013

Diplomate in Oriental Medicine (Dipl. O.M.) from the National Certification Commission for Acupuncture & Oriental Medicine (NCCAOM)

Certification Number: **Avigail: #22064**
 Stephen: #154937

Washington State Dept. of Health East Asian Medicine Practitioner (EAMP)

License number: **Avigail Cohen AC 00002285,**
 Stephen Semptimphelter AC 60428564

2. The scope of practice for an East Asian Medicine Practitioner in the state of Washington includes the following:

- A. Acupuncture, including the use of acupuncture needles or lancets to directly or indirectly stimulate acupuncture points and meridians
- B. Use of electrical, mechanical, or magnetic devices to stimulate acupuncture points and meridians
- C. Moxibustion
- D. Acupressure
- E. Cupping
- F. Dermal friction technique
- G. Infra-red
- H. Sonopuncture
- I. Laserpuncture
- J. Point injection therapy (aquapuncture)
- K. Dietary advice and health education based on East Asian medical theory, including the recommendation and sale of herbs, vitamins, minerals, and dietary nutritional supplements
- L. Breathing, relaxation, and East Asian exercise techniques
- M. Qi gong
- N. East Asian massage and Tui na, which is a method of East Asian bodywork,

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characterized by the kneading, pressure, rolling, shaking, and stretching of the body and does not include spinal manipulation
O. Superficial heat and cold therapies.

3. Side effects may include, but are not limited to:

- A. Pain following treatment
- B. Minor bruising
- C. Infection
- D. Needle sickness
- E. Broken needle

4. Please notify the practitioner if you have any adverse effects from treatment.

5. The patient must inform the practitioner if the patient has a severe bleeding disorder or a pacemaker prior to any treatment.

6. Certain acupuncture points are contraindicated during pregnancy, therefore, please inform the practitioner if there is a possibility that you may be pregnant.

CONSENT FOR TREATMENT

With this knowledge, I voluntarily consent to and authorize Avigail Cohen, L.Ac., MA, EAMP, or Stephen Semptimphelter, L.Ac. EAMP, to perform any of the above procedures, realizing that Avigail and Stephen have given no guarantees to me regarding the cure or improvement of my conditions.

I hereby release Avigail Cohen, L.Ac., MA, EAMP and Stephen Semptimphelter, L.Ac., EAMP from any and all liability, which may occur in connection with the above mentioned procedures, except for failure to perform the procedures with appropriate medical care. I understand that I am free to withdraw my consent and to discontinue participation in these procedures at any time.

Signature of Client & Date

Signature of Person Authorized to Consent & Date

Effective 10/22/15