

FullCircle Chinese Acupuncture HealthCentre

MEDICAL QIGONG

INFORMED CONSENT FORM

Disclaimer:

Medical Qigong is not intended to replace orthodox medicine, but rather to complement it. The meditations, practices, techniques and prescriptions described herein are powerful and may be emotionally, mentally, and physically demanding for some people. The patient should therefore use his own discretion and consult a health care professional before engaging in these exercises and meditations. The treatments offered at **FullCircle Acupuncture HealthCentre** target specific internal organs, meridians, and points on the meridians, and an emotional release post treatment occurs in the majority of patients, and it should not be cause for concern, but not ignored either. Give us a call if you have questions.

Please review the information below then return a signed copy to the Medical Qigong Therapist.

- The Medical Qigong Therapist will use a variety of modalities; including Qi emission therapy, light touch and sound projection.
- The patient may or may not feel different sensations as Qi moves inside their body. However, some may feel warm or cold, others tingling, cooling or twitching as stagnant energy releases from the tissues; still others may see colors or sense smells, or a combination of these sensations.
- During and/or after treatment, some patients may become aware of uncomfortable, suppressed emotions that have been released.
- In order to process the surfaced emotions during treatment and to disperse energetic stagnation, the therapist will assign medical Qigong prescription exercises and meditations; the exercises may include various postures, breathing, focused concentration, physical movement and sound therapy.
- In addition, the patient may be prescribed Chinese herbs, specific nutrition, or psychotherapy as an outside treatment, to complement and enhance the effect of the medical Qigong treatments.

- Patients may feel slightly light-headed after receiving medical Qigong treatment. If this occurs, sit for a few minutes before leaving our premises.

ACKNOWLEDGEMENT

I understand that the treatments offered by the medical Qigong therapists will consist of a series of regular treatments, which may involve 2 to 3 treatments per week at the onset for a six-week period. After six weeks of treatment, patient and therapist will assess the patient's progress and the treatment protocol will be adjusted to present conditions. We may discontinue treatment if it is in the best interest of the patient.

I realize that I am free to withdraw from participation in this treatment program at any time. My signature below indicates that I have read, or had it read to me and understand this consent form and I agree to participate in this treatment.

Patient's Signature _____ Date ____/____/____

Patient's Name (print) _____