INFORMED CONSENT TO TREAT & MANDATORY DISCLOSURE FORM

I hereby request and consent to the performance of the following on myself (or the patient named below, for whom I am legally responsible) by James George-Holland (herby referred to as Jamie) who is a licensed acupuncturist, applied clinical nutritionist and Asian bodywork therapist: acupuncture and other Oriental medical procedures including diagnostic techniques such as questioning, pulse evaluation, palpitation on a variety of areas of my body, observation, range of motion, muscle and orthopedic testing; modes of manual therapy such as Asian bodywork therapy (including: rocking, kneading, pushing, pulling, stretching, rhythmic striking, pressing, rolling, vibrating, grasping, etc…), cupping, moxibustion heat therapy, magnetic stimulation, the application of topical ointments, liniments and lotions; the prescription of herbal and homeopathic medicines as well as dietary supplements; dietary recommendations; exercise advice and healthy lifestyle recommendations.

I understand I have opportunities to discuss with my practitioner, or with other personnel, the nature and purpose of acupuncture and Oriental medical procedures, the methods of therapy, the techniques used, and the duration of therapy. Although I am aware that acupuncture and other procedures used in Oriental medicine have helped millions of people, I understand that no guarantee of cure or improvement in my condition is given or implied. I understand that I may seek a second opinion from another health care professional or may terminate therapy at any time. I also understand that in a professional relationship, sexual intimacy is never appropriate and should be immediately reported to the Director of the Division of Professions and Occupations in the Department of Regulatory Agencies.

I understand and am informed that, as in the practice of conventional Western medicine, in the practice of Oriental medicine there are some risks to treatment. I understand that although these risks are unlikely to occur, they are possible. I understand that these risks include, but are not limited to: bruising or pain or other strong sensation where the needle is inserted, or at location where bodywork, cupping (which will can leave marks on the skin for up to 1 week), or topical ointment/ lotion/ liniment is applied, or radiating from those locations; nerve pain, burns, aggravation of current symptoms, appearance of new symptoms and genera aches. I do not expect the practitioners to be able to anticipate and explain all risks and complications, and I wish to rely on the practitioners to exercise such judgment during the course of my treatment, as the practitioner feels at the time, based on the facts then known, to be in my best interest.

I understand that acupuncture and Oriental medicine treatments may not have the desired therapeutic affect when combined with excessive medication, alcohol consumption or illegal drug use at the time of treatment. If there is reasonable cause to believe that treatment is not appropriate for a patient who is under the influence of illegal drugs, alcohol, or appears to be overly medicated, then a treatment may not be performed at that time. In this case the patient will be informed that they may not be treated at that time and will be requested to reschedule their appointment.

We comply with all rules and regulations promulgated by the Colorado Department of Public Health and Environment, including those related to the proper cleaning and sterilization of needles used in the practice of acupuncture and the sanitation of acupuncture offices. The Colorado Department of Regulatory Agencies, whose contact is as on the right, regulates the practice of acupuncture.

Director of Professions and Occupations
Acupuncturist Licensure
1560 Broadway, Suite 1350
Denver, CO 80202
(303) 894-7800

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Jamie has completed over 3,000 hours of didactic and clinical work during a 4 year Masters in Acupuncture & Oriental Medicine program at AOMA Graduate School of Integrative Medicine. He is a Licensed Acupuncturist and Certified Chinese Herbalist by the state of Colorado, and is nationally board certified as a Diplomate in Oriental Medicine by the National Certification Commission for Acupuncture & Oriental Medicine. Additionally, Jamie completed a 6 month Japanese Traditional Acupuncture Certification with Japanese Master Acupuncturist Koei Kuwahara and has completed over 500 hours of Asian bodywork therapy (Tuina) becoming a Certified Practitioner by the American Organization of Bodywork Therapies of Asia. Jamie studied cosmetic acupuncture with Dr. Jamie Wu, MD (China), LAc and Mei Zen Cosmetic Acupuncture Systems with Dr. Martha Lucas, DOM, PhD, LAc. He has also trained extensively in functional medicine and nutrition and is an Applied Clinical Nutritionist through the Texas Chiropractic College.

I have read, or have had read to me, this informed consent form. I have also had an opportunity to ask question about its content, and by signing below I agree to the above named procedures and conditions of treatment. I intend this consent form to cover the entire course of treatment for my present condition and for any future condition(s) for which I seek treatment with James George-Holland.

_________________  ______________________________________________________________________________________
Patients Name (printed)  Signature of Patient (or Person Authorized To Consent)

_________________  ______________________________________________________________
Relationship or Authority of Representative (if applicable)  Date Signed

_________________  ______________________________________________________________
Signature Acknowledging Receipt of HIPPA Policy
Meeting Point Acupuncture, LLC.

PRIVACY PRACTICES

This notice contains important information about our clinic privacy practices. This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

What is this notice
Meeting Point Acupuncture must collect, maintain and use Non-public Personal Information (NPI) on patients, before providing them with our service. We consider this information private and confidential and have policies and procedures in place to protect the information against unlawful use and disclosure. This notice describes what types of information we collect, explains when and to whom we may disclose it, and provides you with additional important information as to our legal duties and privacy practices. It also describes you rights to access and control your NPI. Meeting Point Acupuncture is required to abide by the terms of this notice. However, we may modify the terms of this notice at any time, and the new notice will be effective for all NPI in our possession at the time of the change, and any treated received thereafter. The information collected by our office is used, maintained, and protected by federal law, The Health Insurance Portability and Accountability Act (HIPAA). Our office does not disclose NPI to anyone, except with your authorization, or otherwise, as permitted by the above law. If you believe your privacy rights under the HIPAA act have been violated, you can submit a written complaint to this clinic’s Privacy Office, address below. You may also complain to the Secretary for Health and Human Services if you believe your privacy rights have been violated. There will be no retaliation for filing a complaint.

What is “non-public personal information” (NPI)
Non-public personal information (NPI) is information that identifies you as an individual and relates to your participation in treatment, your physical or mental health/condition, the provision of treatment or healthcare to you or payment to the institute for the provision of services provided to you.

How does this clinic protect patients’ NPI
 We restrict access to NPI to members of our workforce (staff and trainees) who need to provide care or services to you or are engaged in our clinic’s operations.
 We maintain physical and procedural safeguards to protect your information against unauthorized access and use.
 We have assigned a Privacy Officer who has overall responsibility for developing privacy procedures, educating our workforce, and overseeing the implementation and enforcement of policies and procedures to safeguard your health information against inappropriate access, use and disclosure, consistent with applicable law. You may contact: Meeting Point Acupuncture, Office Manager, 570 South Broadway Denver, CO 80209

How does this clinic use NPI, and for what purposes

Treatment: We may use or disclose your NPI in order to provide you with services and treatment you require or request. We are also permitted to disclose this information within and among our workforce in order to accomplish the same process. However, we are required to limit such uses or disclosures to the minimal amount that is required to provide those services or to complete these activities. Some example of service related disclosure include: the provision, coordination or management of health care and related services by health care providers; consultation between health care providers relating to a patient; referral of a patient for health care from one health care provider to another.

Payment: We may use and disclose NPI so that treatment and services you receive may be billed to and payment collected from you or a third party. For example, we may complete and submit to your healthcare plan or insurance company a description of treatment provided to you. We also may use and disclose your NPI to obtain payment from other third parties that may be responsible for the costs, such as family members.

Health Care Operations: We may also use and disclose NPI to perform health care operations. This is necessary to make sure that all of our patients receive quality care. For example, we may use and disclose NPI for the following: to review our treatment and services and to evaluate the performance of our staff and trainees; to develop clinical guidelines; to inform patients of treatment alternatives; for case management and care coordination as well as general administrative activities such as customer service.

What uses and disclosures do not require your authorization
Below are some examples of circumstances under which we are permitted by law to use or disclose your NPI without your authorization.

Business Associates: We may contract with outside individuals and organizations that perform business services for us, such as billing, management consultants, accreditation organizations, quality assurance reviewers, accountants or attorneys. In certain circumstances, we may need to share your information with a business associated so it can perform a service on our behalf. Our clinic will limit the disclosure of information to a business associate to the amount of information that is the minimum necessary for the business associate to perform services for us. In addition, we will have a written contract in place with the business associate requiring it to protect the privacy of your information.

As required by Law: We will disclose NPI when required by federal, state or local law. We may disclose NPI to public health authorities that are authorized by law to collect information for the purpose of:
• Reporting child abuse or neglect
• Notifying appropriate government agencies and authorities regarding the potential abuse or neglect of an adult patient (including domestic violence)
• Preventing or controlling disease, injury or disability
• Notifying a person regarding the potential risk for spreading or contracting a disease or condition
• Reporting reactions to drugs or problems with products or devices
• Notifying individuals if a product or device we may be using has been recalled
• Notifying your employer under limited circumstances related primarily to workplace injury or illness or medical surveillance CONTINUED

You are welcome to take this with you.
If you choose not to, we will reuse it.
Meeting Point Acupuncture, LLC.

Health Care Oversight Activities: We may disclose NPI to a health oversight agency for activities authorized by law. Oversight activities can include some of the following: investigations, inspections, audits, surveys, licensure and disciplinary actions; civil administrative and criminal procedures or actions; or other activities necessary for the government to monitor compliance with civil rights laws and the health care system in general.

Lawsuits and Disputes: We may use and disclose NPI in response to a court or administrative order, if you are involved in a lawsuit or similar proceeding. We also may disclose your NPI in response to a discovery request, subpoena, or other lawful process by another party involved in the dispute, but only if we have made an effort to inform you of the request or to obtain a court order protecting the information the party has requested.

Law Enforcement: We may disclose NPI if asked to do so by a law enforcement official as part of law enforcement activities, in investigations of criminal conduct at our institute or of victims of crime, in emergency situations to report a crime (including the location or victim(s) of the crime, or the description, identity or location of the perpetrator); or when required to do so by law.

Serious Threats to Health or Safety: We may use and disclose your NPI when necessary to reduce or prevent a serious threat to your health and safety or the health and safety of another individual or the public. Under these circumstances, we will only make disclosures to a person or organization able to help prevent the threat.

Military Purposes: We may disclose NPI when you are a member of United States or foreign military forces (including veterans) and if required by the appropriate military command authorities.

Protective Services for the President, National Security and Intelligence Activities: We may use and disclose NPI to federal officials for intelligence and national security activities authorized by law. We also may disclose your NPI to federal officials in order to protect the President, other officials or foreign heads of state, or to conduct investigations.

Worker's Compensation: We may release NPI for worker's compensation or similar programs.

Your rights governing the information we collect, use and maintain

The Right to Inspect and Copy: You have the right to inspect and obtain a copy of your NPI that we maintain and have in our possession, including treatment records and billing records. If you request copies, we will charge you a fee for the costs of copying, mailing, labor and supplies associated with you request. To inspect and copy your NPI, you must submit your request in writing to Meeting Point Acupuncture 570 S. Broadway St. Denver, CO 80209. By law you may inspect and obtain copies of your NPI, contained in your designated records, except for the following:

- Psychotherapy notes
- Information compiled in reasonable anticipation of, or for use in, a civil, criminal, or administrative action or proceeding
- Health information maintained by us to the extent to which the provision of access to you would be prohibited by law.

We will reasonably attempt to accommodate any request for NPI excluding the information as to which we have a ground to deny access. Upon denial of a request we will provide you with a written denial specifying the legal basis for denial, a statement of your rights, and a description of how you may file a complaint with us.

The Right to Amend or Correct NPI: If you feel that any NPI we have about you is not correct or incomplete, you may ask us to correct or amend the information. We keep your information for seven (7) years. You have the right to request an amendment within this time. To request an amendment, your request and the reason that supports the request must be made in writing to Meeting Point Acupuncture 570 S. Broadway St. Denver, CO 80209. Our office reserves the right to deny your request for an amendment if it is not in writing or does not include a reason to support the request. In addition, we may deny your request if you ask us to amend information that:

- Was not created by us
- Is not part of the medical information kept by us
- Is not part of the information which you would be permitted to inspect and copy
- Is accurate and complete

The Right to an Accounting or Disclosures: An accounting of disclosures is a list of the disclosures we have made, if any, of your NPI. You have the right to request an accounting of disclosures made by us. This right applies to disclosures for purposes other than those made to carry out treatment, payment and health care operations as described in this notice. It also excludes communications of NPI made to you or disclosures authorized by you. Your request must be made in writing and state a time period that cannot be longer than six (6) years. We may charge you for the costs of providing the list. We will notify you of the cost involved and you may choose to withdraw or modify your request at that time before any costs are incurred.

The Right to Receive Communications of NPI by Alternative Means or at Alternative Locations: You have the right to request that we communicate with you about your treatment and related issues in a particular manner or at a certain location. For example, you may ask that we contact you at work rather than at home. We will accommodate all reasonable requests made in writing.

The Right to Request Restrictions: You have the right to request a restriction or limitation on the NPI we use or disclose about you for treatment, payment or health care operations as described in this notice. You also have the right to request a limit on the treatment information we disclose about you to someone who is involved in your care or the payment for your care (like a family member or friend). Our office is not required to agree to your request, however, if we do agree, we will comply with your request until we receive notice from you that you no longer want the restriction to apply. Any request for a restriction on our use and disclosure of your NPI must be made in writing to the address below. Your request must describe in a clear and concise manner: (a) the information you wish restricted; (b) whether you are requesting to limit our use, disclosure or both; and (c) to whom you want the limits to apply.

The Right to Provide an Authorization for Other Uses and Disclosures: We will obtain your written authorization for uses and disclosures that are not identified by this notice or permitted by applicable law. Any authorization you provide to us regarding the use and disclosure of your NPI may be revoked at any time in writing to the address below. After you revoke your authorization, we will no longer use or disclose your NPI for the purposes described in the authorization, except under the following circumstance: We have taken action in reliance upon your authorization before we received your written revocation.

The Right to Obtain a Paper Copy of This Notice: You have the right to obtain a paper copy of this notice of privacy practices at any time by contacting our office: Meeting Point Acupuncture 570 S. Broadway Denver, CO 80209