

The Stationery Factory  
63 Flansburg Ave.  
Dalton, MA 01226  
518-229-8188

Welcome to my practice. I look forward to working with you to bring greater harmony to your life. In an effort to provide full disclosure, please be aware that I practice with my Cock-a-Poo (a little dog), Penny. She has hair, rather than fur, making her hypo-allergenic. I am particularly allergic to dogs with fur, but am able to tolerate her well. If you have concerns about being in my office with her for any reason, now or in the future, please let me know and I will be happy to assist you in locating an alternate practitioner that can accommodate your needs.

**Fees:** Fees are based upon \$75 per hour rate. The Initial Office Visit is between 1.5 and 2.0 hours depending upon complexity. Follow up Acupuncture appointments are 1.0 hour, Follow up EEM Energy Balancing Sessions run from 1.0 to 1.5 hours.

**Cancellation Policy:** In the event you have a scheduled appointment that you find you cannot keep, please call at least 24 hours prior to the appointment to cancel. If you cancel with less than 24 hours' notice you will be responsible for the full costs of the visit. Email and text messages are not valid ways to cancel scheduled appointments. Please leave a message on my voice mail at the number above.

**Insurance:** In an effort to keep the cost of treatment to a minimum I do not bill insurance companies. Payment in full is expected at the time of your treatment. I will provide you with a receipt that you may submit to an insurance company for reimbursement.

**Confidentiality:** Please be assured that just as in any other medical practice, the information you reveal in the process of your treatments is strictly confidential and cannot be released without your written authorization.

**What to expect:** During the initial office visit I review your symptoms and health history, and conduct a complete physical examination. This involves examining the tongue along with palpating the pulses, the abdomen and various diagnostic points on the body. The information gathered from this examination is analyzed to produce a diagnosis and treatment plan designed to rebalance qi and alleviate symptoms. It generally takes six to ten treatments either to relieve symptoms or to have an understanding of how long it will take for the body to respond. Acute conditions often resolve relatively easily, while more chronic conditions usually take longer to heal.

**What to wear:** Please wear or bring with you loose fitting clothing that can be pulled above the elbow and knee, and provides access to your abdomen. Many of the points used in treatments are located below the elbow and knee as well as the back and abdomen. We need to be able to easily access these areas.

## Treatment Information

Acupuncture is performed by the insertion of pre-sterilized, disposable acupuncture needles through the skin, and/or the application of heat or electrical stimulation to certain points on the body. Your acupuncture treatment may be combined with, moxibustion, cupping, bloodletting, electric or magnetic stimulation, derma-friction (Gua-sha), Tui Na (Chinese Massage), far infra-red heat lamp, seven-star needling, therapeutic exercises, and Nutritional Counseling based on the principles of Chinese Medicine. Your practitioner will explain the nature of each type of treatment as needed.

Acupuncture is an extremely low risk therapy, with a very low incidence of side effects, however, on occasion you may experience bruising, temporary numbness or tingling near the site of needle insertion, dizziness, lightheadedness, or fainting. Although very rare, burns and/or scarring are a potential risk of moxibustion or cupping, or with the use of heat lamps.

Any herbs or nutritional supplements (which are from plant, animal and mineral sources) that may be recommended are traditionally considered safe in the practice of Chinese Medicine. The same herbs may be inappropriate during pregnancy. Please inform your practitioner immediately if you become pregnant or experience any gastro-intestinal reactions or any other unanticipated or unpleasant effects due to the consumption herbs or nutritional supplements.

In addition to Acupuncture, Marion Bergan, is also Certified to Practice, and employs the methods used in Eden Energy Medicine (EEM) in her practice. EEM involves balancing and restoring your body's natural energies for the purposes of increasing your vitality, strengthening your immune system, mental capacities and optimizing your health. Although EEM uses the term "medicine", it does not imply that EEM practitioners are practicing medicine. EEM assesses and corrects energetic imbalances in the body, and is not a substitute for the diagnosis and/or treatment of medical or mental health conditions by a licensed health care professional.

EEM techniques bring energies back into a state of balance and harmony. The techniques used generally consist of various forms of light or deeper touch and movement of the practitioners hands above your body, or in your energy field. If you are uncomfortable with being touched or with any of the procedures, or experience any discomfort please inform your practitioner immediately. Often there is something that can be done to counter the discomfort. For a deeper understanding of EEM please consult my website:

[Fiverhythm.com/page/eden-energy-medicine/](http://Fiverhythm.com/page/eden-energy-medicine/) or consult Donna Eden's website:  
[Innersource.net/em/about/energy-medicine.html](http://Innersource.net/em/about/energy-medicine.html)

I understand that I have a right to refuse any form of treatment. I have read, or have had read to me the above Treatment Information. I have also had an opportunity to ask questions about its content, and by signing below I agree to the above-named procedures. I also understand there is always a possibility of an unexpected complication and I

understand that no guarantee can be made concerning the results 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.

I hereby request and consent to the performance of acupuncture treatments and other procedures within the scope of acupuncture on me (or on the patient named below, for which I am legally responsible) by Marion Bergan, Licensed Acupuncturist.

I understand that methods or treatments may include but are not limited to acupuncture, moxibustion, cupping, bloodletting, electrical stimulation, Tui Na (Chinese massage), Gua Sha, Chinese or Western herbal medicine, and nutritional counseling and Eden Energy Medicine practices.

I understand it may be necessary for my practitioner to contact another one of my health care providers in order to coordinate medical treatment, to discuss an emergency situation and/or to share appropriate medical information. My signature gives my practitioner permission to release my medical records for the reasons listed above.

### **Informed Consent:**

I hereby release Marion Bergan from any and all liability, past, present and future, relating to the above-mentioned procedures.

I understand that my signature on this form indicates that I have read and understand the preceding information regarding my treatment. I understand that if I have any questions about this information, I should ask my practitioner.

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**Patient's Signature**

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**Print Name**

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

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**Marion Bergan, Licensed Acupuncturist**