

Mandatory Disclosure Statement, Informed Consent, and Cancellation Policy

Julianne Ambrosia, L.Ac, Dipl. OM.
Advanced Chiropractic Clinic, LLC
19641 Parker Square Drive, Suite J
Parker, CO 80134

This disclosure statement is in compliance with the State of Colorado, Department of Regulatory Agencies, Colorado Statute Title 12 Article 29.5. All rules and regulations set forth by the Department of Health are strictly adhered to including proper cleaning, sterilization, and sanitation of equipment and office.

Education and Experience:

Julianne Ambrosia, L.Ac, Dipl OM completed her Masters of Traditional Chinese Medicine degree from the Colorado School for Traditional Chinese Medicine. The four year program consists of 2,850 hours of education including 990 hours of clinical practice. Julianne's training includes acupuncture, internal medicine, moxibustion, tui na, cupping, Chinese nutrition, auriculotherapy, and energetic exercise. The National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) certified Julianne as a Diplomat of Oriental Medicine and Acupuncture in April of 2009. Julianne is a licensed acupuncturist and is licensed as a Diplomat of Oriental Medicine through the State of Colorado. Neither of these licensure have been revoked or suspended. Julianne is a member of the Acupuncture Association of Colorado. She has also received her Clean Needle Technique certification. Ambrosia Acupuncture LLC complies with the rules and regulations set forth by the Colorado Department of Health, including the use of single-use, disposable, factory-sterilized needles. Also this includes the proper cleaning and sanitation of Ambrosia Acupuncture LLC's clinic and proper disposal of used needles.

Fee Schedule:

Initial Intake and Treatment (1 st time visit)	\$120 + the cost of herbal medicine
Follow-up Treatments	\$65 + the cost of herbal medicine
Herbal Consultation Only	\$45 + the cost of herbal medicine

Informed Consent:

I hereby request and consent to the performance of acupuncture and Traditional Chinese Medicine procedures by my Julianne Ambrosia, L.Ac, Dipl. OM. I have been informed that acupuncture is a safe method of treatment but that it may have side effects including pain, bruising, and numbness at site of needle, discomfort, and dizziness. Extremely rare risks include nerve damage, organ puncture, possibility of miscarriage,

burns from moxibustion or heating lamps, and infection. Other side effects and risk may occur. If I suspect I am pregnant I will immediately inform Julianne Ambrosia, L.Ac, Dipl. OM. I understand that there are no guarantees regarding the improvement of my condition. I understand there may be limitations to the care provided and that, in my best interest, I may be referred to another acupuncture practitioner or other healthcare provider who may be more qualified to treat my condition. I do not expect Julianne Ambrosia, L.Ac, Dipl. OM to explain or anticipate all risks or complications. I permit Julianne Ambrosia, L.Ac, Dipl. OM to determine and/or alter the course of treatment which is based upon the known facts. I understand that I have the right to accept or reject treatment at any time.

I have read and understand the above consent. Also, I have had the opportunity to ask questions regarding this consent. By signing below, I am agreeing to all terms and conditions stipulated by this document. I intend this form to cover the entire course of treatment for my condition and for any future condition (s) for which I seek treatment.

Patient's Rights:

***In a professional relationship, sexual intimacy is never appropriate and should be reported to the Director of the Division of Registration in the Department of Regulatory Agencies (DORA).

***The patient is entitled to receive information about the methods of therapy, the techniques used, and the duration of the therapy (if known).

***The patient may seek a second opinion from another healthcare professional or may terminate therapy at any time.

***The practice of acupuncture is regulated by the Colorado Department of Regulatory Agencies (DORA). The Director's address and telephone number is:

Director, Division of Registrations
Acupuncturists Licensure
1560 Broadway, Suite 1350
Denver, CO 80202
(303) 894-7800

Patient's or Guardian's Signature

Date

Signature Acknowledging the Receipt of HIPPA Policy

Date