

Sue Foss is an East Asian Medicine Practitioner (EAMP), licensed in Washington State. She holds a Master's degree in acupuncture and is board certified by the National Certification Commission of Acupuncture and Oriental Medicine in acupuncture and Chinese Herbology.

Listed below are the techniques she is trained in and licensed by the state to perform.

- **Acupuncture:** The insertion of sterile, disposable needles through the skin into underlying tissues at specific points on the body.
- **Cupping:** The application of glass cups to the skin in a manner as to create suction.
- **Moxabustion:** The burning of an herb on or near an acupuncture point.
- **Acupressure:** The application of pressure to the acupoints.
- **East Asian massage and Tuina:** A vigorous type of massage. Does not include spinal manipulation.
- **Gua Sha (dermal friction):** The rubbing on an area of the body with a blunt instrument.
- **TDP Lamp:** A mineral heat lamp used to warm a large area of the body.
- **Laserpuncture:** The stimulation of acupuncture points with laser.
- **Dietary advice and health education based on East Asian medical theory, including the recommendation and sale of herbs and supplements.**
- **Breathing, relaxation, and East Asian exercise techniques.**

Potential Risks include, but are not limited to:

Pain, bruising, bleeding, infection, possible aggravation of symptoms existing prior to the acupuncture treatment, needle sickness (dizziness), and broken needle.

Potential Benefits:

Drugless improvement or elimination of presenting symptoms and energetic balancing.

Treatment Authorization

With this knowledge I voluntarily consent to the listed procedures, realizing that no guarantees have been made to me by my practitioner regarding cure or improvement of my condition. I release my practitioner from any and all liabilities, 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 this consent and to discontinue participation in these procedures at any time.

Signature of patient or legal guardian

Date

Cancellation Policy

Please give the clinic at least 24 hours notice if you need to cancel or change your appointment. It is our policy to charge you for missed visits.

Initials of patient

Tiger Mountain Center for Acupuncture

Tiger Mountain Center for Acupuncture provides office space for various practitioners. Sue Foss is the sole practitioner in her practice and is not in partnership with any other practitioner.

Initials of patient

Privacy Policy

Your personal information is confidential in accordance with the HIPAA patient privacy law. Your information will be shared only with your insurance company and your referring practitioner, unless you give written permission to do otherwise. Correspondence via e-mail is not guaranteed to be secure. Please limit email communication to appointment or call back requests.

I have read the above and have received a copy of Sue Foss' privacy policy.

Signature of patient or legal guardian

Date

Insurance Information

Insurance Company: _____

ID number: _____ Group number: _____

If you are being treated for injuries related to a motor vehicle accident:

Date of accident: _____ Claim number: _____

Adjuster's name: _____

Adjuster's Phone number: _____

I understand that insurance coverage does not guarantee payment, and that I am financially responsible for treatment.

Signature of patient or legal guardian

Date