

Patient Notification of Qualifications and Scope of Practice

East Asian medicine means a health care service using East Asian medicine diagnosis and treatment to promote health and treat organic or functional disorders.

1. **My qualifications include the following education and license information:**
 - (a) Graduated from Northwest Institute of Acupuncture and Oriental Medicine (March 1992).
 - (b) Degree and training focused on Traditional Chinese Medicine including Chinese herbs, nutrition, and acupuncture; although many other hours spent in study, training, and practice of Japanese style acupuncture.
 - (c) Experience in private practice spanning nearly 20 years.
 - (d) East Asian Medicine Practitioner (EAMP) / Licensed Acupuncturist (LAc), Washington State License #00000125 (Initial Issue 3-2-92).

2. **The scope of practice for an East Asian medicine practitioner in the state of Washington includes the following:**
 - (a) Acupuncture, including the use of acupuncture needles or lancets to directly or indirectly stimulate acupuncture points and meridians;
 - (b) Use of electrical, mechanical, or magnetic devices to stimulate acupuncture points and meridians;
 - (c) Moxibustion;
 - (d) Acupressure;
 - (e) Cupping;
 - (f) Dermal friction technique;
 - (g) Infra-red;
 - (h) Dietary advice and health education based on East Asian medical theory, including the recommendation and sale of herbs, vitamins, minerals, and dietary and nutritional supplements;
 - (i) Breathing, relaxation, and East Asian exercise techniques;
 - (j) Qi gong;
 - (k) East Asian massage and Tui na, which is a method of East Asian bodywork, characterized by the kneading, pressing, rolling, shaking, and stretching of the body and does not include spinal manipulation; and
 - (l) Superficial heat and cold therapies.

3. **Side effects may include, but are not limited to:**
 - (a) Pain following treatment;
 - (b) Minor bruising;
 - (c) Infection;
 - (d) Needle sickness; and
 - (e) Broken needle.

4. **The patient must inform the East Asian medicine practitioner if the patient has a severe bleeding disorder or pace maker prior to any treatment.**

Date

Signature of Patient