

Middle Way Acupuncture Student Clinic
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.

I. Qualifications: supervisor; educational institute; graduation year; license #

- Matthew Van Dyke; Five Branches University; 2006; AC 00002999
- Linda Munson; Northwest Institute of Acupuncture and Oriental Medicine; 2002; AC 00002124
- Elsa Del Toro; Middle Way Acupuncture Institute; 2010; AC 60197009
- Other _____

II. The scope of practice for an East Asian medicine practitioner in the state of Washington includes:

- (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 (guasha)
- (g) Infra-red
- (h) Sonopuncture
- (i) Laserpuncture
- (j) Point injection therapy (aquapuncture)
- (k) 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
- (l) Breathing, relaxation, and East Asian exercise techniques
- (m) Qi gong
- (n) East Asian massage and Tuina, 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
- (o) Superficial heat and cold therapies

I. Side effects may include, but are not limited to:

- (a) Pain following treatment
- (b) Minor bruising
- (c) Infection
- (d) Needle sickness
- (e) Broken needle

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

I have read and understand the supervisor's qualifications, scope of practice, potential side effects and importance of disclosing information regarding bleeding disorders and/or pace makers.

Patient Signature: _____ Date: _____