

INFORMED CONSENT TO TREAT

Auricular (ear) acupuncture is the insertion of a thin sterile needle into the surface of the external ear at specific points. Ear acupuncture is generally very safe, serious side effects are rare (less than one per 10,000 treatments.) Patients usually report little or no pain during an ear acupuncture treatment, sometimes only a small pricking sensation. The practitioner will insert the needles at specific points following a strict protocol.

Side effects: On occasion there may be slight bruising or minor bleeding where a needle was inserted. Drowsiness may occur, if so you are advised not to drive. Symptoms may occasionally get worse after treatments; inform your GP and ear acupuncturist if so. Fainting can occur in certain patients, particularly after the first treatment.

As ear acupuncture has a chemical effect on the body, it is important to inform your therapist about the following:

- Do you have a pacemaker fitted or other electrical implants?
- Are you actively trying for a pregnancy? Could you be pregnant?
- Do you have any history of blood disorders e.g. hepatitis, haemophilia?
- Do you have any metal allergies?
- Have you suffered from epilepsy or have a history of fits or faints?
- Are you diabetic?
- Do you take any medication including anti-coagulants?
- Do you have a history of cancer or currently undergoing treatment?
- Are you known to have conditions of the circulatory system including high blood pressure, damaged heart valves?
- **Is there any other medical condition your therapist should be informed about?**
- Do you give blood?
- Have you eaten in the last two hours?
- Have you had recent surgery?

Ear acupuncture is an invasive procedure and you are therefore required to give your full consent before treatment. **I am happy to give my consent for ear acupuncture protocol based treatment(s) and I understand that I can choose to opt out of the treatment at any time.**

Patient Name: Date of Birth.....
Patient Signature:.....
Date:.....

Therapist Name and Signature:.....
Date:.....

