

## **COLORADO MANDATORY DISCLOSURE STATEMENT**

Jodi Holmes  
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### **Education and Experience**

Jodi Holmes earned her Master of Acupuncture and Oriental Medicine degree from the Colorado School of Traditional Chinese Medicine in December 2021. This 28 month program consists of 2,370 hours of education including 540 hours of clinical practice. She is certified as a Diplomat in Acupuncture and Traditional Chinese Medicine by the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) in December 2021, which includes certification in Clean Needle Technique and became a licensed acupuncturist in Colorado and Iowa in May 2022.

Jodi's training includes adjunctive therapies such as moxibustion, tui na, acupressure, cupping, auriculotherapy and dietary and lifestyle recommendations.

Jodi received her Bachelor of Science degree in Exercise Science at the University of Iowa in December 1988 and worked in the fitness industry for 20 years. She also received her massage certification from Cottonwood School of Massage in 1999 and has been working as a certified massage therapist for over 20 years. None of these licenses, certificates or registrations have ever been suspended or revoked.

This clinic complies with the rules and regulations enforced by the Colorado Department of Health, including the proper cleaning and sanitation of acupuncture offices. Only single-use, disposable, factory-sterilized needles are utilized.

### **Fee Schedule**

Intake Consultation and Treatment (1 ½ hours)	\$95
Acupuncture/Cupping (1 hour 15min.)	\$85
Acupuncture Follow-up Treatment (1 hour)	\$75
Cupping (30 min.)	\$45

### **Patient's Rights**

The patient is entitled to receive information about the methods of therapy, the techniques used and the duration of therapy. 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 Director of Registrations, Colorado Department of Regulatory Agencies (DORA). If you have any comments, questions, or complaints, contact the Acupuncturists Registration Office, 1560 Broadway, Suite 1350, Denver, Colorado 80202.

I have read and understand this document.

Patient's or Guardian's signature:

Date:

## **INFORMED CONSENT AND AGREEMENT**

### **INFORMED CONSENT AND AGREEMENT FOR PROFESSIONAL SERVICES**

In consideration of receiving professional acupuncture services from Cactus Sport and Spine Physical Therapy, you agree to the terms of service below:

1. **Term.** This agreement shall begin on the date of signature. Either party may terminate this agreement at any time by providing notice of termination to the other.
2. **Health Intake, Privacy Policy and Preparation for Treatment.** Prior to receiving any acupuncture or related services from Cactus Sport and Spine, you agree to complete and submit, to the best of your knowledge, the health intake form provided to you. In addition, by signing this agreement, you acknowledge that you have received and reviewed the Privacy Policy and Preparation for Treatment instructions provided by Cactus Sport and Spine.
3. **Fees.** You are responsible for all payments due to Cactus Sport and Spine for services rendered at the rates identified in the Fee Schedule. Cactus Sport and Spine may, at any time, increase its fees for services, provided it publishes notice of any changes to you. All fees for services are due on the date of services rendered. In the event you issue payment that is returned for insufficient funds, you shall be responsible for the total amount of the payment as well as an additional \$50 charge.

I hereby agree and give my consent to professional acupuncture services for treating my condition. I authorize the release of any medical information to Cactus Sport and Spine to help with my treatment. I understand that I am responsible for any payments that may occur and understand the risks involved.

I acknowledge that I have seen and reviewed the above information.

Patient's Signature:

Date:

# Acupuncture at Cactus Sport and Spine

## PATIENT CONSENT FORM

I understand that, under the Health Insurance Portability & Accountability Act of 1996 (HIPAA), I have certain rights to privacy regarding my protected health information. I understand that this information can and will be used to:

- Conduct, plan and direct my treatment and follow-up among the multiple healthcare providers who may be involved in that treatment directly and indirectly.
- Obtain payment from third-party payers.
- Conduct normal healthcare operations such as quality assessments and physician certifications.

I have been informed by you of your Notice of Privacy Practices containing a more complete description of the uses and disclosures of my health information. I have been given the right to review such Notice of Privacy Practices prior to signing this consent. I understand that this organization has the right to change its Notice of Privacy Practices from time to time and that I may contact this organization at any time at the address below to obtain a current copy of the Notice of Privacy Practices.

I understand that I may request in writing that you restrict how my private information is used or disclosed to carry out treatment, payment or health care operations. I also understand you are not required to agree to my requested restrictions, but if you do agree then you are bound to abide by such restrictions.

I understand that I may revoke this consent in writing at any time, except to the extent that you have taken action relying on this consent.

Patient Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## **Acupuncture at Cactus Sport and Spine “Your Healing Journey”**

Acupuncture is an effective form of health care has evolved into a complete and holistic medical system. Acupuncturists and practitioners of Traditional Chinese Medicine (TCM) use this non-invasive healing modality to help millions of people get well and stay healthy.

The main objective of Acupuncture is to determine where there are imbalances in the body as they relate to TCM. When the flow of Qi (the vital energy that flows throughout the body) is disrupted, illness and disease may occur. An imbalance in any of the 14 main meridian channels causes an alteration in the flow of Qi through the body. This can result in a lessening of the body's innate ability to heal itself and express maximum health potential.

Once imbalances are detected, various treatment modalities may be employed to correct these imbalances. Any health condition or disease presented by the patient will be treated according to TCM and treatment will relate only to the quantity, quality and balance of Qi.

**Acupuncture treats the underlying imbalances in your body to help your natural healing process. It helps your body heal itself.**

Patients will be advised if a non-Acupuncture related or otherwise unusual finding is encountered during the course of an Acupuncture examination. If advice, diagnosis or treatment of those findings is desired, patients will be referred to a qualified health care professional.

### **Preparation for treatment:**

Wear comfortable clothing

Make sure you have eaten but not too full

Please inform us if you are not feeling well

Avoid alcohol, marijuana, and pain medications before treatment

Let us know if you are nervous for the treatment or needle sensitive

Bring any relevant medical records

Avoid scheduling acupuncture before or after something really strenuous

Above all shut off your cell phone and enjoy your self care time, you deserve it