**Naturopathic Medicine** is a system of health care that utilizes only natural processes and sources. Naturopathic Doctors (ND's) assess the whole person, taking into consideration physical, mental, emotional, and spiritual aspects of the individual in the treatment and prevention of disease.

#### CONSENT TO NATUROPATHIC THERAPIES

ND's use a variety of therapeutic approaches, either alone or in combination. Dr. Lun, ND will make recommendations based on her best clinical judgement, but you may choose to decline any treatment at any time. She typically uses the following naturopathic therapies in her practice:

**CLINICAL NUTRITION:** Proper nutrition is one of the major foundations of health and well-being. Dr. Lun, ND will help you identify areas of your diet that may be modified to optimize your health, or apply a special diet targeted towards your specific health concern(s). **Nutritional Supplementation:** The use of moderate to high doses of specific nutrients and nutritional compounds may be used to optimize health and/or stimulate healing.

**TRADITIONAL CHINESE MEDICINE:** A system of diagnostic techniques and treatment methods that have evolved for over 3,000 years. It includes the use of acupuncture, Chinese herbal formulas, dietary recommendations, and Chinese cupping massage to bring balance to the body's energy. **Acupuncture** involves the insertion of sterilized needles through the skin into underlying tissues at specific locations on the body (primarily abdomen, arms, legs, hands, feet, and ears). Needles are discarded after each use. With your consent, a low-voltage electrical current may be applied to some needles in order to stimulate certain points for pain relief and to enhance the treatment (electro-acupuncture). **Chinese herbal formulas** may be given in the form of pills, liquid extractions (tinctures), or decoctions (strong teas) to be taken internally or used externally as a wash. These formulas may include shell, mineral and animal materials, as well as plants. **Dietary recommendations** based on Traditional Chinese medical theory may be used. **Chinese cupping massage** is an option for muscle tension, detoxification, and energetic balance.

**HERBAL MEDICINE**: The use of herbal teas, liquid extractions (tinctures), capsules, and other forms of herbal preparations to assist in the recovery from injury and disease. These compounds are also used to boost the body's immune system to stimulate healing and prevent future disease.

**HOMEOPATHY:** A form of energetic medicine based on the *Law of Similars* – the application of very minute doses of a substance is used to treat symptoms that would be provoked by large doses of the same substance. These remedies are typically of plant, animal or mineral origin, and are used to stimulate the body's innate self-healing abilities on the physical, emotional and mental levels.

**PHYSICAL MEDICINE:** Hands-on techniques such as soft tissue massage for the purpose of treating musculoskeletal and neurological problems. Hydrotherapy is a subset of physical medicine that involves the use of hot and cold water applications. Some types of treatments are performed by the patient at home, and others by Dr. Lun, ND in-office.

**LIFESTYLE & STRESS COUNSELLING:** Certain aspects of your lifestyle may be affecting your health in a significant way. Dr. Lun, ND may be able to identify patterns, behaviours, and/or thinking patterns that are detrimental to your health and teach you ways to improve your well-being.

Your naturopathic care will begin with a thorough case history and may also include a screening physical examination, including a breast exam for females. Lab tests and specific physical exams such as gynecological, breast, rectal, prostate, and/or genital are sometimes needed in order to provide information to make a diagnosis or for case development, and these may be performed by Dr. Lun, ND or be referred to your medical doctor.



#### **CONSENT TO RISKS OF TREATMENT**

Even mild therapies may have complications, especially with physiological conditions such as pregnancy, lactation, and in very young children. Some therapies must be used with caution if you have certain diseases such as diabetes, heart, liver, or kidney disease. It is very important, therefore, that you inform Dr. Lun, ND immediately of any disease or health condition that you or another health professional suspects or is aware of, or if you are pregnant or suspect you are pregnant, or if you are breastfeeding a child.

There are some risks, however rare, with treatment using Naturopathic Medicine. These include, but are not limited to: aggravation of pre-existing symptoms, allergic reactions to supplements or herbs, pain, bruising, or injury from acupuncture, venipuncture (e.g. blood draw) or intramuscular injections, fainting or puncturing of an organ with acupuncture needles, muscle sprains and strains, and disc injuries and stroke from spinal manipulation.

This is to acknowledge that, as a patient, I have been informed and understand that:

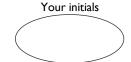
- A record will be kept of the health services provided to me. This record will be kept confidential and will not be released to others unless so directed by myself or my representative or unless it is required by law. I understand that I may look at my record at any time and may request a copy by paying an appropriate fee.
- 2. Any questions I have will be answered by Dr. Lun, ND to the best of her ability.
- 3. Results are not guaranteed. I do not expect Dr. Lun, ND to be able to anticipate and explain all risks and complications and I rely on her to exercise judgement during the course of the procedure which she feels at the time is in my best interest, based upon the facts then known.
- 4. Any treatment or advice provided to me by Dr. Lun, ND is not mutually exclusive of any treatment or advice that I may now be receiving or may in the future receive from another licensed health care provider.
- 5. I remain at liberty to seek or continue medical care from any physician or surgeon or other health care provider qualified to practice in Ontario, Canada.
- 6. Dr. Lun, ND may, based on her medical training, suggest or recommend modifications to treatment or advice I am receiving or have received from another health care provider, but it is not mandatory that I make these modifications or discontinue treatment from any other licensed health care provider.
- 7. The treatment and therapies rendered or recommended to me by Dr. Lun, ND may be different than those usually offered by a medical doctor or other licensed health care provider.

#### CONSENT TO FEES FOR SERVICES & PRODUCTS

Payment must be submitted at the time of each visit and appointment fees are as follows:

- First Appointment ADULT: \$185 (120 mins) | YOUTH: \$155 (75-90 mins) | CHILD: \$135 (45-60 mins)
- Second Appointment ADULT: \$115 (75-90 mins) | YOUTH: \$105 (60 mins) | CHILD: \$70 (30-45 mins)
- Follow-up Appointments (applicable after First and Second Appointments)
  ADULT: \$80 (45-60 mins), \$95 (75 mins), \$110 (90 mins) | YOUTH: \$55 (30-45 mins) | CHILD: \$55 (30-45 mins)
- <u>Telephone/E-mail consultations</u> Telephone/E-mail consultation fees may be applied to any telephone and/or e-mail communication(s) following the First Appointment at Dr. Lun, ND's discretion.
- \$30 fee for NSF (non-sufficient funds) cheques
- \$20-\$50 for copying patient files
- A fee of up to the full appointment fee for missed appointments or cancellation with less than 24-hours notice

All fees listed above are in Canadian Dollars and are subject to change without notice. Supplements and products are individually priced and an additional charge of 13% HST will be applied.



#### CONSENT TO REGARDING PERSONAL INFORMATION BY CLINIC STAFF & DR. BENA LUN, ND

Your identity will be protected at all times and a record will be kept of the health services provided. You may look at your medical record at any time and may request a copy (although this may be subject to copying fee). Privacy of your personal information is an important part of our clinic while providing you with quality naturopathic care. We understand the importance of protecting your personal information and are committed to collecting, using and disclosing your personal information responsibly. We will try to be as open and transparent as possible about the way we handle your personal information.

At this office, Dr. Bena Lun, ND acts as the Privacy Information Officer. All staff members who come into contact with your personal information are aware of the sensitive nature of the information that you have disclosed.

Our privacy policy outlines what our clinic is doing to ensure that:

- Only necessary information is collected about you
- We only share your information with your consent
- Storage, retention and destruction of your personal information complies with the existing legislation, and privacy protection protocols
- Our privacy protocols comply with privacy legislation and standards of our regulatory body, the College of Naturopaths of Ontario (CONO)

#### How our clinic collects, uses and discloses patients' personal information:

To help you understand how our clinic protects your personal information, we have outlined here how we are using and disclosing your information:

- To assess your health concerns.
- To provide health care.
- To advise you of treatment options.
- To establish and maintain contact with you.
- To remind you of upcoming appointments.
- To allow us to efficiently follow-up for treatment, care and billing.
- To complete claims for insurance purposes and/or verify insurance audits.
- To communicate with other treating health care providers (with your express consent).
- To send newsletters and other information mailings (with your express consent).

- To invoice for services and products.
- To process payments.
- To collect unpaid accounts.
- To comply with legal and regulatory requirements of our regulatory body, the College of Naturopaths of Ontario (CONO), under the Regulated Health Professions Act (RHPA).
- To assist this clinic to comply with all regulatory requirements.
- To comply generally with the law.
- To allow potential purchasers, practice brokers or advisors to conduct and audit in preparation for a practice sale.



By signing the PATIENT CONSENT section of this Informed Consent & Fees Policy Form, you agree that you have given your informed consent to the collection, use and/or disclosure of your personal information as outlined in the previous 3 pages of this form.

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I have read the information provided and with this know and diagnostic and therapeutic procedures outlined applicable):	· · · · · · · · · · · · · · · · · · ·				
I intend this consent to apply to all of my present and function. I understand that I am free to withdraw my consequencedures at any time. I have read and fully underst document, including the outlined fees and policies, and unprior notice.	ent and discontinue participation in these and and agree to the information in this				
FOR PATIENTS 16 YRS OF AGE AND OLDER: Name of Patient (please print in block letters):					
FOR PATIENTS UNDER 16 YRS OF AGE: Name of Guardi	an (please print in block letters):				
Signature:	_ Date:				
This section is for office use only					
Naturopathic Doctor: DR. BENA LUN, ND #1868					
Signature:	_ Date:				

### **PATIENT COPY**

By signing the PATIENT CONSENT section of this Informed Consent & Fees Policy Form, you agree that you have given your informed consent to the collection, use and/or disclosure of your personal information as outlined in the previous 3 pages of this form.

I have read the and diagnostic applicable):	•		0 .	,	•	•

I intend this consent to apply to all of my present and future naturopathic care with Dr. Bena Lun, ND. I understand that I am free to withdraw my consent and discontinue participation in these procedures at any time. I have read and fully understand and agree to the information in this document, including the outlined fees and policies, and understand that the fees may change without prior notice.

FOR PATIENTS 16 YRS OF AGE AND OLDER: Name of Patient (please print in block letters):

FOR PATIENTS UNDER 16 YRS OF AGE: Name of Guardian (please print in block letters):							
Signature:	Date:						

This section is for office use only

**PATIENT CONSENT** 

Naturopathic Doctor: DR. BENA LUN, ND #1868

Signature: Date:

**CLINIC COPY**