

Claims prevention for acupuncturists

A GUIDE TO HELP YOU

Prevent patient injury

Reduce liability risks, and

Increase defensibility

MIEC

Medical Insurance Exchange of California

Medical Insurance Exchange of California

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SECTION ONE:

What is malpractice?

In performing professional health services for a patient, a licensed acupuncturist has the duty to possess and use the same degree of learning and skill ordinarily possessed by other reputable acupuncturists practicing in the same or similar locality and under similar circumstances.

Licensed acupuncturists must use reasonable diligence and their best judgment in the exercise of their skills and the application of their learning, in an effort to accomplish the purpose for which they are employed.

A failure to perform any such duty is negligence. The negligence of an acupuncturist is malpractice.

In the state of California, four elements must be proven to successfully win a medical malpractice lawsuit against an acupuncturist: 1) there was a doctor-patient relationship between the plaintiff (the patient who sues) and the defendant (the acupuncturist being sued); 2) there was negligence on the part of the acupuncturist; 3) there was an injury to the patient; and 4) the injury was caused by the negligence.

What are the most obvious potential liability issues for acupuncturists? For what are they most likely to be sued?

- ▶ Misdiagnosis
- ▶ Improper treatment
- ▶ Failure to make a timely referral to a medical doctor
- ▶ Needle-related injuries, including infection, pneumothorax, or nerve injury
- ▶ Bruising, blistering, or other skin or soft tissue damage
- ▶ Adverse reaction to prescribed herbs
- ▶ Failure to obtain promised results
- ▶ Failure to obtain informed consent
- ▶ False advertising
- ▶ Sexual misconduct¹

SECTION TWO:

Recommendations to reduce your liability risks and increase your defensibility.

- Know the laws of your profession.

Acupuncturists licensed by the Acupuncture Board, physicians licensed by the Medical Board of California, and dentists or podiatrists who have completed training required by their licensing boards

¹ MIEC's policy provides no indemnity coverage for accusations of sexual misconduct.

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may perform acupuncture. ***Business & Professions Code §4935-4949.***

Business & Professions Code §4937 governs the scope of practice for an acupuncturist.

Acupuncturists in the state of California may perform or prescribe: acupuncture, oriental massage, acupressure, electroacupuncture, moxibustion², cupping, breathing techniques, exercise, and the prescription of drugless substances and supplemental dietary herbs.

You will find a list of laws related to the practice of acupuncture in the state of California in the Appendix of this booklet; relevant websites are also listed.

- Accurately represent yourself and the scope of your licensure and training.

Only acupuncturists who possess a license or certificate which authorizes the use of the title “Doctor,” or who possess a doctorate degree from an accredited, approved or authorized educational institution as set forth in California law, may use the title “Doctor.” The use of the title in the absence of these credentials, or without further indicating the authority by which one may use the title, is considered unprofessional conduct. ***California Code of Regulations. Title 16. Division 13.7. Article 5. §1399.456.***

- Establish, maintain and advance your professional credentials, knowledge, training and competence.

■ Know and maintain professional ethics for acupuncturists. Professional organizations of acupuncturists may vary in their description of professional ethics, but the following represent some of the most basic ethical guidelines:

- Always serve the best interest of the patient. Do no harm.
- Maintain patient confidentiality.
- Do not discriminate in patient selection or provision of services because of religion, age, race, color, gender, ethnicity, nationality, or sexual preference.
- Remain within the scope of your practice, your licensure, and your competence.
- Perform only necessary services, and bill fairly for the services rendered.
- Invite the patient to participate in his/her care, including decision-making.

- Communicate clearly with your patients.

Introduce patients to your practice with a patient information brochure. You may tell patients about yourself, your policies, what they should know about the services you provide, and what you expect of them. (*Look in the Appendix for a prototype brochure; you may send the draft of your patient information brochure to MIEC’s Loss Prevention Department for review.*)

Educate your patients—in writing—about acupuncture and the other services you perform. Educate them about their conditions, their care, when to call you, what to expect after treatment, and how to

² Direct moxibustion is excluded from **Medical Insurance Exchange of California** coverage, policy endorsement E11 on page 19.

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take the herbs you've recommended. (*You will find advice for writing patient educational materials in the Appendix of this booklet.*)

From time to time, ask patients what they like (and what they don't like) about your practice. A patient satisfaction survey is a patient relations tool and an opportunity to learn how to manage some aspects of your practice even better. Thank patients who identify a way to improve your practice. (*A sample patient survey is in the Appendix of this booklet.*)

- Appropriately obtain informed consent for invasive treatment or treatment that involves some risk; document that you have done so. Remember that obtaining consent is a process, not a form. (*Call MIEC's Loss Prevention Department for more detailed information on California's consent laws. You will find a consent form for acupuncturists in the Appendix of this booklet.*)
- Make appropriate and timely referrals to medical doctors for conditions outside of your scope of practice; consider making referrals for patients who do not respond to the treatment you provide.
- Implement a quality improvement program in your practice to ensure that you establish, meet, and maintain the standard of care for acupuncturists. If you are in solo practice, consider implementing a quality improvement program with a colleague who has a similar solo practice. A quality improvement program includes a random chart review to evaluate documentation deficiencies and an adverse outcome review to determine if the standards of care were met. (*For further information, call MIEC's Loss Prevention Department.*)
- Follow treatment procedures as outlined in the California Code of Regulations. Dispose of used acupuncture needles as mandated in the **California Health & Safety Code**. (*See the Appendix for a copy of applicable regulations.*)
- Store drugs and herbs properly; rotate inventory for quality control.
- Know when and how to properly withdraw from care.

When an acupuncturist decides that his/her relationship with a patient should end (because the patient is non-compliant, non-cooperative, doesn't keep appointments, doesn't pay bills, etc.), it is possible to end the acupuncturist-patient relationship. To avoid the allegation of abandonment, the acupuncturist should: (1) write the patient a letter to withdraw from the patient's care [*see Appendix for sample*], citing a reason for the withdrawal is optional; (2) offer to send a copy of the patient's chart to a subsequent treating acupuncturist; (3) offer emergency care for a period of 10 to 15 days to give the patient an opportunity to find another acupuncturist; (4) if you wish, give the patient referral names of acupuncture organizations, or of acupuncturists you know will accept the patient; and (5) send the letter by registered mail, return-receipt-requested.

- Train your staff to know how to recognize potential liability and how to prevent it.

Office staff often influence the acupuncturist-patient relationship. They may even become the liaison between acupuncturist and patient if the patient is fearful of or intimidated by the expertise of the

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acupuncturist. Office staff often inadvertently obtain information about patients that patients have not told the acupuncturist.

Acupuncturists can educate their staff by asking them to read MIEC's loss prevention literature, providing in-service training, and sending staff to liability prevention seminars. In these ways, staff members can improve their communication skills—including their use of the telephone; understand how and why to protect patient confidentiality; increase their competence; and improve their ability to be diplomatic and courteous to patients, all of which decrease their employer's liability risks.

- Know how and when to properly release medical records.
- Maintain an ongoing premises safety program.

SECTION THREE:

Documentation recommendations for acupuncturists.

Why should an acupuncturist establish and maintain high-quality medical charts? *Title 16. Division 13.7. Article 5. §1399.453* says, "An acupuncturist shall keep complete and accurate records on each patient who is given acupuncture treatment, including but not limited to, treatments given and progress made as a result of the acupuncture treatments." Accurate and complete medical records protect acupuncturists and their patients. Patients may need copies of their medical records for subsequent treaters, for insurance purposes, or for verification of illness and treatment. When other practitioners rely on patients' medical records, legible, current, detailed and complete chart notes ensure the continuity of care and protect patients. Quality documentation justifies the treatment rendered and the fees charged, and differentiates between the patient's and the acupuncturist's responsibilities.

- All charts should be organized chronologically or in categories (the latter with chart dividers). All pages should be firmly affixed to the chart. All pages should include the patient's name and identifier. All entries should be initialed or signed, unless only one person (the acupuncturist) writes entries. All entries should be accurate, **legible** and timely.
- If you ask patients to fill out forms about their health, ensure that all spaces are filled in and document evidence of your review by either initialing the form or mentioning the contents in your progress note. Asking patients to tell you about their health is helpful. However, if patients leave a blank on a form because they are embarrassed, do not understand the question, are in denial about a problem, or for some other reason fail to answer a question, someone should obtain and document the patient's response. If the question is not applicable, void the blank. Blanks on forms may indicate that although the acupuncturist knew it was important information, he or she failed to pursue an answer.

You are responsible for knowing what patients have told you about their health. Your initials on patient forms or relevant comments in your progress notes are evidence you have reviewed and considered the patient's information.

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- Use a SOAP note, or similar system, to document patient care:

S for Subjective: Document the patient's complaints in his/her own words (with quotes) if possible; number the complaints if there is more than one; note symptoms and their onset, changes, duration, frequency, history and attempts to alleviate them; allergies; medicines the patient takes (including over-the-counter [OTC] drugs and herbs); and anything else in patients' stories that is clinically noteworthy. Document verified Western medicine diagnoses, citing the name of the patient's physician or the name of the institution where the patient was diagnosed and/or treated. If the patient's diagnosis is anecdotal only, indicate "per patient" to indicate that the patient is the source of the information.

O for Objective: Your observations – such as patient's posture, emotional state, general demeanor; physical exam results (including vital signs if it is your custom to take them); test results considered, etc.

A for Assessment: Your impression of the problem and your Oriental medicine diagnosis (or traditional Chinese medicine [TCM] diagnosis). Include the rationale for conclusions, when appropriate.

P for Plan: What you will do to treat the patient at that visit and your plan for future treatment, such as herbs and supplements (frequency and dose); acupuncture and what points are needed; moxa and where it is applied; manipulation; dietary recommendations; recommended tests; recommended exercises, etc. Include justification for any deviations from usual care.

- Consider using a Medication Control Record (*MCR*; see *Appendix*) to document herbs you have recommended over the course of a patient's care. The MCR is designed to be attached to the inside front cover of a chart for an easily accessed review of what a patient has taken over a period of time.
- Note the names of physicians and other practitioners patients see and why they are going to them.
- Note the results of procedures you perform, including adverse reactions if they occur.
- If an interpreter is used, document that person's name and his or her relationship to the patient.
- When you obtain a patient's informed consent for a procedure or medication that entails risk, document that you have done so. The process of obtaining informed consent should include 1) an explanation of the risks, benefits, and alternatives (and their risks and benefits) of the recommended treatment, medication or referral—include "no treatment" as one of the alternatives; 2) a discussion in which the patient has the opportunity to obtain answers for his or her questions; 3) the patient's declaration that he or she wishes to proceed; and 4) documentation of the discussion. You may wish to have patients sign a form verifying that you have obtained their consent; if so, send a copy home with the patient.

If a patient refuses to follow your recommendations (for treatment, a test, referral to another practitioner, etc.) and you believe that the consequences may be significant, document 1) what you have recommended and why; 2) that you have explained the potential dangers of the patient's non-

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compliance; and 3) that the fully-informed patient understood your explanation and chose to reject your advice.

- Correct charting errors properly. Draw a single line through the written error; make the legible correction in the margin; date and initial the correction.
- Indicate in the progress note when the patient should return, even if it is “as needed.” This passes responsibility to patients, inviting their cooperation in their own care.
- Document failed, rescheduled, and canceled appointments. This provides evidence that the patient contributed to a breach in treatment continuity.
- Document significant telephone conversations. “Significant” telephone conversations are those in which a patient reveals new symptoms, reaction to treatment, or any other new information that has clinical importance; discussions between patient and acupuncturists in which a new course of action is decided; discussions between health professionals about patients’ health; and telephoned test results, lab reports, a consultant’s opinion, or other information about patients conveyed from the original source to the acupuncturist or visa versa. These conversations must be documented, dated, and in some instances, the time of the call should be included. In medical malpractice litigation, the time and content of such calls are sometimes in dispute, and in the absence of documentation, it may be difficult to determine whose memory of the event is the most accurate.
- Document patient education. Optimally, acupuncturists educate their patients about their condition and treatment orally and supplement their discussions with written information for patients to take home with them. Documenting both oral discussions and the dispensing of written information provides evidence that the acupuncturist gave essential information to the patient to help the patient understand and participate more fully in his or her own care.
- Use line drawings or anatomical templates to supplement narrative notes, when appropriate.
- Protect patients’ confidentiality. Be familiar with California laws governing patient confidentiality.
- Ensure that all chart entries are legible. While jokes are made in the media about the poor handwriting of health professionals, it is no laughing matter when one clinician misunderstands another’s handwriting and a patient is injured as a result. Dictation and transcription, word processing, printing, scribing, or using templates and other appropriate forms are alternatives to poor handwriting.

SECTION FOUR:

Your relationship with your liability carrier.

The Medical Insurance Exchange of California staff wants to be of assistance to you. Please feel free to call us when you have questions or concerns related to your policy, your liability risks, individual patients, or practice management issues that impact your risks and/or your defensibility.

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Call the Underwriting Department:

- ◆ when you have a question about your policy
- ◆ when you have a question about coverage

Call the Claims Department:

- ◆ when you receive legal papers related to a patient, such as
 - a request for records
 - a notice of intent to sue
 - a letter threatening suit
 - a subpoena for records
 - an attorney's request for a meeting or a report
 - a deposition notice
 - a summons and complaint
- ◆ when you want to know the status of a claim
- ◆ when you want to report a claim, a potential claim, an incident or an untoward result

Call the Loss Prevention Department:

- ◆ when you want to know how to retire or close your practice
- ◆ when you wonder how long you should keep medical records
- ◆ when you have a question about
 - informed consent or refusal
 - patient education
 - forms and brochures for the office
 - practice surveys
- ◆ when you want to know how to properly withdraw from a patient's care

SECTION FIVE:

A reminder about MIEC's acupuncture coverage exclusions³.

"Neither defense nor indemnity coverage is available under this policy for claims, civil lawsuits, arbitrations, legal or administrative proceedings, incidents, accidents, or occurrences resulting from:

- Acts or omissions not authorized by insured acupuncturist's license within the State of California.
- Use of direct moxibustion.
- Acupuncture used as anesthesia for the purpose of performing surgical procedures.
- Use of non-disposable needles.
- Acupuncture administered during "labor and delivery."

³ Only the actual policy booklet declarations and endorsements contain all the conditions and exclusions applicable to a particular policyholder. This guide is a summary of several exclusions only, and does not replace or modify the policy in any way.

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APPENDIX

A consent form for acupuncturists

“Treatment Procedures”

[California Code of Regulations, Title 16, Division 13.7, Article 5, §1339.451]

A list of California statute citations applicable to the practice of acupuncture

A list of websites related to the practice of acupuncture

Advice for writing patient informational materials

A prototype patient information brochure

A prototype patient satisfaction survey

A sample withdrawal-from-care letter

A sample Medication Control Record

Acupuncturist's Letterhead

Information About Acupuncture Treatment

What is acupuncture? Acupuncture is a healing art that involves the stimulation of specific points on the body. It has the effect of normalizing physiological function, modifying the perception of pain, and treating certain diseases or dysfunctions of the body. The stimulation may be produced by needles, heat, digital pressure, electrical currents, or other means, but most frequently by needling.

Herbs and nutritional supplements may be recommended and are considered safe in the practice of Chinese Medicine.

What are the side effects or complications? Acupuncture is considered a safe method of treatment, but occasionally there may be some bruising or tingling near the needling sites that last a few days. There have been rare instances reported in which a patient fainted, developed a scar or infection, experienced a spontaneous abortion, or sustained a pneumothorax (air in the chest cavity that could cause a collapsed lung).

What are the contraindications for acupuncture or use of Chinese herbal medicine? Contraindications for acupuncture treatment and certain herbs include a history of a bleeding disorder or current anticoagulant therapy, an implanted pacemaker or prosthetic heart valve, use of certain medications, and/or pregnancy.

Consent for Acupuncture Treatment

_____ has explained the benefits and possible risks of treatment by acupuncture and use of Chinese herbal medicine to me. My questions have been answered and I wish to proceed. No guarantee of results has been made.

I do not have an implanted pacemaker or prosthetic heart valve. I do not take steroids or anticoagulants. I take the following drugs: _____

For female patients: I am not pregnant. My last normal menstrual period began on: _____

I have read this information sheet and consent to treatment by acupuncture for:

[Problem or condition]

I have received a copy of this information and consent form.

Patient's name: (PLEASE PRINT) _____

Patient's signature: _____ Witness: _____

Acupuncturist's signature: _____ Date: _____

California Code of Regulations
Title 16. Division 13.7. Article 5. §1399.451
“Treatment Procedures”

“In treating a patient, an acupuncturist shall adhere to the following procedures:

(a) The acupuncturist's hands shall be brush-scrubbed with soap and warm water immediately before examining patients or handling acupuncture needles and other instruments, and between patients.

(b) All acupuncture needles and other instruments shall be sterilized before and between uses in a manner which will destroy all microorganisms. All needle trays which contain sterile needles shall also be sterile. Each time needles and other instruments are sterilized, the acupuncturist shall use a tape or strip indicator which shows that sterilization is complete.

(c) Acupuncture points, where needles are to be inserted, shall be cleaned with an appropriate antiseptic before insertion of the needle.

(d) In the event an acupuncture needle inserted in a patient breaks subcutaneously, the treating acupuncturist shall immediately consult a physician. An acupuncturist shall not sever or penetrate the tissues in order to excise such a needle.

(e) Any complication, including but not limited to, hematoma, peritonitis or pneumothorax arising out of acupuncture treatment shall be referred immediately to a physician or dentist or podiatrist, if appropriate, if immediate medical treatment is required.

(f) Acupuncture shall not be performed using hypodermic needles.

(g) All acupuncture needles and instruments to be discarded shall be safely disposed of. Needles shall be discarded in one of the two following ways:

(1) They shall be sterilized and discarded in a sealed container, or

(2) they shall be placed in a sealed, unbreakable container marked ‘Hazardous Waste’ and disposed of in a manner consistent with subsections (b), (c), (g) and (h) of Title 22 Cal. Code Reg. Section 66840.”

California Code of Regulations. Title 16. Division 13.7. Article 5. § 1399.454.

“An acupuncturist shall use needles labeled for single use only that meet the requirements of federal regulations . . . It shall constitute unprofessional conduct for an acupuncturist to use a needle more than once.”

Health & Safety Code §118275 (c)

“(c) Sharps waste shall be contained in a sharps container pursuant to Section 118285.”

Health & Safety Code §118280 (b)

“(b) ... Containers meeting the requirements specified in Section 66840 of Title 22 of the California Code of Regulations, as it read on December 31, 1990, may also be used until the replacement of the containers is necessary or existing stock has been depleted.”

Health & Safety Code §118285

“To containerize sharps waste, a person shall do all of the following:

(a) Place all sharps waste into a sharps container.

(b) Tape closed or tightly lid full sharps container ready for disposal to preclude loss of contents.

(c) Store sharps containers ready for disposal for not more than seven days without the written approval of the enforcement agency.

(d) Label sharps containers with the words ‘sharps waste’ or with the international biohazard symbol and the word ‘BIOHAZARD.’”

California Code of Regulations. Title 22. Division 6. Article 1. §80001(u)(1)

“(u)(1) ‘Universal precautions’ means an approach to infection control that treats all human blood and body fluids as if they are infectious. Generally, universal precautions consist of regular hand-washing after coming into contact with another person’s body fluids (mucous, saliva, urine, etc.) and includes the use of gloves when handling blood and body fluids that contain blood.” For the specific universal precaution guidelines, refer to the continuation of §80001.”

California statutes applicable to the practice of acupuncture

Business & Professions Code §4925-4979: Acupuncture Licensure Act of California

Business & Professions Code §4937: The scope of practice for an acupuncturist

California Code of Regulations. Title 16. Division 13.7. Article 5. §1399.451: Treatment procedures

California Code of Regulations. Title 16. Division 13.7. Article 5. §1399.456: Acupuncture and the title “Doctor”

Health & Safety Code §118285: Disposal of sharps waste

California Code of Regulations. Title 22. Division 6. Article 1. §80001(u)(1): Universal precautions

Websites related to the practice of acupuncture

California Acupuncture Board

1424 Howe Avenue, Suite 37, Sacramento, CA 95825-3233

Office: 916/263-2680

Website: www.acupuncture.ca.gov

(Multiple links available through this website)

California Legislative website

www.leginfo.ca.gov (Business & Professions Code; Health & Safety Code)

California Code of Regulations website

www.oal.ca.gov (Office of Administrative Law)

California State Oriental Medical Association

703 Market St., Suite 250, San Francisco, CA 94103

Phone: 800/ 477-4564

Website: www.csomaonline.org

California Association of Acupuncture and Oriental Medicine

1231 State Street, Suite 208A, Santa Barbara, CA 93101

Phone: 800/477-4564

Website: www.caaom.org

American Association of Oriental Medicine

433 Front Street, Catasauqua, PA 18032

Phone: 888/500-7999

Website: www.aaom.org

(Multiple links to acupuncture societies available through this website)

Effective Forms and Educational Materials for Patients

Forms and other written materials in the acupuncture office assist in gathering necessary medical, social, and financial information from patients; inform and educate patients about general health issues and their medical conditions; and provide information the patient needs to know before consenting to acupuncture and Chinese medicine treatments. Well-designed forms or brochures avoid misunderstanding, confusion or errors that could cause patient injury.

SUGGESTIONS FOR EDUCATIONAL MATERIALS FOR PATIENTS:

- ✓ Organize the material in logical sequence.
- ✓ Use simple language and short paragraphs.
- ✓ Avoid jargon.
- ✓ Choose a format that is readable, uncrowded, and pleasing to the eye.
- ✓ Be concise. Do not waste words.
- ✓ Check and double-check for grammar, punctuation, and spelling accuracy.
- ✓ Print the information on your letterhead or with your logo.
- ✓ Reevaluate material periodically for content and relevance.
- ✓ Express directions and instructions clearly and concisely.

Example:

UNCLEAR - Watch your diet.

CLEAR - Avoid high cholesterol foods. Increase your water intake to 8 glasses per day. Decrease your salt intake. Do not add salt to prepared foods; avoid potato chips, lunch meats and other salty snacks; and avoid high sodium soft drinks.

- ✓ Use clear illustrations and/or diagrams when appropriate.
- ✓ Ask lay-persons to read the educational material for clarity.
- ✓ Number materials for easy documentation of patient receipt. For example, write "P. I. # 5, 4/3/06" in the chart, which means the patient received a copy of Patient Information sheet #5 on April 3, 2006.

SUGGESTIONS FOR MEDICAL HISTORY/SOCIAL HISTORY/FINANCIAL FORMS:

- ✓ Provide a space for the patient's name, identifying number (if applicable), and complete date on each page of the form.
- ✓ Ensure that questions are clear enough to elicit the information you seek. (If it is important to determine if the patient has had frequent diarrhea, constipation, nausea or related symptoms, for example, ask specific questions about each, rather than, "Do you have digestive problems?")
- ✓ Provide adequate space for responses.

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Your Doctor and You

A PARTNERSHIP FOR BETTER HEALTH

John A. Doe, MD, LAc, OMD
555 North Blank Street
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415 + 555-1111

Practice of Internal Medicine
and Acupuncture

Dear Patient,

The doctor-patient relationship requires both cooperation and mutual trust. I will strive to provide you with the best possible medical care, and ask that you participate in this effort to the best of your ability.

This brochure was prepared to help you become better acquainted with the nature of my medical practice. I welcome any questions you may have about our professional relationship.

About Me...

I am a graduate of the Harvard Medical School, and did post-graduate medical studies at Johns Hopkins Medical School. I was certified by the American Board of Internal Medicine in 1958. This certification means that I qualified, after extensive testing, to specialize in Internal Medicine. I graduated from the New England School of Acupuncture and am a member of the American Academy of Medical Acupuncture.

I am a member of several medical organizations, including the American Society of Internal Medicine, the San Francisco Medical Society, the California Medical Association, and the American Medical Association. I attend annual continuing medical education programs in my specialty.

Hospitals where I have staff privileges include St. Mary's Hospital, Pacific Medical Center, and Davies Medical Center, San Francisco.

My office hours are from 10:00 am to 4:00 pm every weekday, except Wednesday. When I am off call, or attending to hospitalized patients, my office or answering service will refer you to Dr. Rhonda Roe, who is also a specialist in internal medicine, if you need treatment before I can return. In an emergency, you may go directly to the emergency department at any of the hospitals listed above. The doctor on call will attend to your needs while I am being located.

I am as concerned as you about rising medical costs, and am doing my best to keep fees reasonable by only prescribing tests, treatment and medications I believe are necessary. Whenever practical, I encourage patients to share in the decisions about their medical care.

Except in emergencies, for your protection, we do not refill medications after office hours when your medical record is unavailable to review. Please plan ahead for your refill needs.

My fees for routine office visits and laboratory tests are posted at the reception desk. You are invited to review the fee schedule with my medical assistant, who will be happy to explain them in more detail.

Our office bills monthly. If you have questions about your bill, or if you have a financial difficulty that may require an adjustment in your payment schedule, please let us know. We want to try to accommodate patients in this regard. If you

find an error on your bill, bring it to our attention so that we can correct it. If you have an insurance plan or belong to a health plan, we will assist you to complete the necessary claim forms.

About You...

Because I believe it is important for you and your family to have confidence in the medical treatment you receive, and because it is both necessary and desirable that you participate in maintaining good health habits, I hope you will assist me by doing the following:

1. Keep your appointments. If you must cancel or re-schedule an appointment, please let us know as early as you can, so that other patients can be scheduled. If a follow-up visit is necessary, you will be given a card showing the date and time of the next visit. It is your responsibility to return or re-schedule the visit.
2. Follow medical advice. A doctor's treatment or medication prescribed are only part of the program to keep you in good health. Medical advice is always given for your benefit, and your cooperation is essential.
3. Ask questions whenever you do not understand your treatment or my medical advice. For your protection and mine, California laws give patients the right to know about the treatment they receive. Sometimes, good practice requires that I tell you about risks associated with treatment or the use of medication, as well as the limitations of both. You are always welcome to ask for more details if you wish. We have printed material about tests to screen for cancer, diabetes, heart disease and about other medical topics. Please ask me or my staff for copies.
4. Always report any problems you have with medications, herbs, or other treatment. Different people react differently to the same treatment or drugs. It is possible for me to properly manage your care only if you tell me about difficulties you are having, or if medications are not effective or causing you discomfort.
5. If you are being seen by other doctors or acupuncturists, or are going to have surgery, with your written authorization I will send your other doctors a summary of my medical care. Be sure to tell me the names of any medication other doctors have prescribed for you.
6. Let me know if you have a complaint. Medicine is very complex. New research and experience constantly provide beneficial changes in diagnosis and treatment. Although every physician wishes to do his best, no doctor can guarantee a cure or promise a perfect result in every case. Doctors make mistakes, too. If you have a complaint and we cannot resolve it together, I can refer you to an impartial grievance committee of the medical society, which will review the problem with you.

For Your Information...

My office phone number is 555-1111

My on-call doctor's phone number is 555-2222. (Dr. Rhonda Roe)

If you need an ambulance, call 911.

[Include parking information; a map of the locale; public transportation that serves the area, or other information that will help your patients. Some physicians include their photograph in the brochure; notes about the office staff; special projects, such as open houses; immunization programs, information about the nature and practice of acupuncture and related treatments, etc.]

If you need emergency treatment, go promptly to the Emergency Department at Pacific Medical Center, Clay & Buchanan Sts., or Davies Medical Center, Castro & Duboce Sts., San Francisco.

John A. Doe, MD, LAc, OMD

Patient Survey

We Want to Hear from You!

Your health is important to us; so is your opinion.
Please tell us what you think about our practice by answering the following questions.
Your answers will help us serve you better.
Thank you for your response.

What three things do you like best about our practice?

1

2

3

What three things do you like least about our practice?

1

2

3

Comments:

Name (Optional):

Acupuncturist's
logo and address

SAMPLE LETTER OF WITHDRAWAL FROM CARE

[Date]

Dear : _____

I find it necessary to inform you that I will no longer be able to serve as your acupuncturist. The reason for this decision is [indicate a reason or omit this sentence.]

As you [may] require the services of an acupuncturist in the future, I recommend that you promptly find another acupuncturist to care for you. Contact the [local or state acupuncturists' society] for the names of acupuncturists who are accepting new patients.

I will be available to treat you on an emergency basis only until [insert date, 15-30 days after this letter is mailed]. This will give you time to find a new acupuncturist. Enclosed is an authorization form that permits me to send your new acupuncturist a copy of your records. Please complete the form and return it to me.

Sincerely yours,

(acceptable title format)

SENT BY CERTIFIED MAIL ON DATE WITH RETURN RECEIPT REQUESTED.

[Keep a copy of this letter and the returned receipt in the patient's chart.]

Patient's Name: _____ D.O.B. _____

ALLERGIES: _____

Medication Control Record

MEDICATION and DIRECTIONS	Refill Date	CHANGES	Init'l	Refill Date	CHANGES	Init'l
Date _____						
Rx'd for _____						
Details:						
Refills x _____						
<input type="checkbox"/> Written instructions given _____						
MEDICATION and DIRECTIONS	Refill Date	CHANGES	Init'l	Refill Date	CHANGES	Init'l
Date _____						
Rx'd for _____						
Details:						
Refills x _____						
<input type="checkbox"/> Written instructions given _____						
MEDICATION and DIRECTIONS	Refill Date	CHANGES	Init'l	Refill Date	CHANGES	Init'l
Date _____						
Rx'd for _____						
Details:						
Refills x _____						
<input type="checkbox"/> Written instructions given _____						
MEDICATION and DIRECTIONS	Refill Date	CHANGES	Init'l	Refill Date	CHANGES	Init'l
Date _____						
Rx'd for _____						
Details:						
Refills x _____						
<input type="checkbox"/> Written instructions given _____						
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Date _____						
Rx'd for _____						
Details:						
Refills x _____						
<input type="checkbox"/> Written instructions given _____						
MEDICATION and DIRECTIONS	Refill Date	CHANGES	Init'l	Refill Date	CHANGES	Init'l
Date _____						
Rx'd for _____						
Details:						
Refills x _____						
<input type="checkbox"/> Written instructions given _____						



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Fax 510-420-7066

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