

Energy is the Medicine

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ENERGY MEDICINE SERVICES DISCLOSURE STATEMENT AND AGREEMENT

Welcome! This document contains important information about my professional services and business policies. It is rather long because it covers a wide range of possible situations, many of which will not apply to you. Still, it provides a framework for understanding the services you are considering. Please read it carefully and initial on the lines indicating that you fully understand the information being provided. Also, please note any questions you might have. We can discuss them at our next meeting. If you decide to use my services and sign this document, it will represent an agreement between us.

WHAT IS ENERGY MEDICINE?

I am a certified advanced practitioner of Eden Energy Medicine. Energy Medicine is an approach that involves balancing and restoring your body's natural energies for the purposes of increasing your vitality, strengthening your mental capacities, and optimizing your health. The form I use draws from Donna Eden and her book, *Energy Medicine*.

Roots. The techniques you will be experiencing and learning trace back to ancient healing and spiritual traditions such as yoga, tai chi, and acupuncture. The form I use and teach is thoroughly modern and does not require adherence to any particular set of beliefs or practices. The core concept is that your personal well-being and effectiveness are directly related to the state of your body's energies.

Your Body's Energies. Einstein's famous formula, $E=mc^2$, changed the course of physics and of history by showing that matter is a form of energy. Our bodies are comprised of molecules that are in constant motion and that are continually being influenced by outside forces. The medical profession utilizes electromagnetic fields with devices such as EKGs, EEGs, and MRIs. The vital role these energies play in our everyday health and well-being is well established.

Energy Medicine Techniques. The techniques I will be using and teaching you are based on the premise that by promoting balance and flow in the body's electromagnetic and subtle energies, health and well-being are enhanced. The techniques may involve the use of certain postures or movements or touching, holding, pressing upon, tracing, or circling over specified areas of the skin. They move, balance, enhance, and restore the body's energies. I may also employ a procedure called "energy testing" where I apply light pressure to your outstretched

arm, sometimes while you or I touch another area of your body. This is a way of assessing how your energies are flowing through specific areas of your body and may help us identify the techniques that will be most beneficial for you. The methods we will be using lend themselves to highly individualized applications in the office as well as to self-care exercises you will do at home.

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WHAT ARE THE LIMITATIONS OF MY ENERGY MEDICINE PRACTICE?

Although Energy Medicine uses the term “medicine,” it does not imply that Energy Medicine practitioners are practicing medicine. Energy Medicine is a term used by many training programs that teach people how to assess and correct for energy imbalances in the body. Energy Medicine is not a substitute for the diagnosis and/or treatment of medical or mental health conditions by a licensed health care professional. If you have been given any type of diagnosis, my services should be used only in conjunction with your Doctor’s care. I do not diagnose or treat medical or mental health disorders, nor am I trained or licensed to do so. Energy Medicine attempts to optimize the body’s overall health and vitality, but it is not to be used instead of appropriate care from a licensed professional.

Besides the fact that Energy Medicine does not diagnose or treat illness, another difference between my services and visits to a medical doctor is that effective energy work requires your active involvement between sessions. Our sessions will establish energy patterns that optimize body, mind, and spirit. Reinforcing these new patterns through the practice of energy exercises at home will reinforce, maintain, and extend the benefits you receive in the sessions.

Energy Medicine techniques bring disturbed energies back to a state of balance and harmony. These corrections will generally consist of various forms of light or deeper touch and of movement of my hands within your body’s energy field. If you are uncomfortable with being touched or with any of the procedures being used, please inform me and I will stop immediately.

While the methods I use and teach are gentle and considered non-invasive, it is possible that physical or emotional after-effects may occur after your energies have been stimulated and adjusted. In some instances, deeper pressure is used to move energies that may be blocked or congested in a particular area of the body, and this may cause some pain or discomfort. Dizziness, nausea, or anxiety, are relatively unusual but not unheard of side-effects to energy work. If any procedure is uncomfortable or leads to discomfort, please tell me at once. I will instantly stop if you request me to do so and can often provide a technique to counter the discomfort.

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MY BACKGROUND AND TRAINING

I am a certified Advanced Practitioner, a 4 year certification of Eden Energy Medicine, thru Innersource. I am a certified teacher of EM 101/102 and Foundations (year one of the 2 year certification program.)

MEETINGS

I generally schedule one 90-minute appointment at a time and date we agree upon. Sessions may also, by prior agreement, be longer, shorter, more frequent, or less frequent. Please allow 120 min. (2 hrs.) for the initial appointment.

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PROFESSIONAL RECORDS

I keep brief records on each session, primarily noting the date of the session, the interventions used, and progress or obstacles observed as they relate to your goals in working with me. You are welcome to request, in writing, that I make available to other health care providers a copy of your file. I maintain your records in a secure location that cannot be accessed by anyone else. I will maintain your records for at least five years after our last contact, after which time I may securely dispose of them.

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CONFIDENTIALITY

With the exception of special situations described below, you have the absolute right to the confidentiality of your therapy. I cannot and will not tell anyone else what you have told me, or even that you are in therapy with me without your prior written permission. Under the provisions of the Health Care Information Act of 1992, I may under certain circumstances legally speak to another health care provider or a member of your family about you without your prior consent, but I will not do so unless the situation is an emergency. I will always act so as to protect your privacy to the best of my ability. You may direct me to share information with whomever you chose, and you can change your mind and revoke that permission at any time.

You are also protected under the provisions of the Federal Health Insurance Portability and Accountability Act (HIPAA). However, if you elect to communicate with me by email at some point in our work together, please be aware that email is not completely confidential. All emails are retained in the logs of your or my Internet service provider. While under normal circumstances no one looks at these logs, they are, in theory, available to be read by the system administrators of the Internet service provider. Any email I receive from you, and any responses I send to you, will be kept as a part of your treatment record. Following are seven exceptions to your right to confidentiality:

1. There are some situations in which I am legally obligated to take action to protect others from harm, even if I have to reveal some information about a client's treatment. For

example, if I believe that a child, an elderly person, or a disabled person is being abused, I must file a report with the appropriate state or local agency.

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2. If I believe that a client is threatening serious bodily harm to another, I am required to take protective actions. These actions may include notifying the potential victim, contacting the police, or seeking hospitalization for the client.

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3. If I believe you are in imminent danger of harming yourself, I may legally break confidentiality and contact the police, a local crisis team, or a family member or other intimates.

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4. If you tell me of the behavior of another named health or mental health care provider which suggests this person has either (1) engaged in sexual contact with a patient, including yourself, or (2) is impaired from practice in some manner due to cognitive, emotional, behavioral, or health problems, then the law requires me to report this to the practitioner's state licensing board. I would inform you before taking this step. If you are my client and also a health care provider, however, your confidentiality remains protected under the law from this kind of reporting.

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5. In certain legal proceedings, particularly those involving child custody or those in which your emotional condition or treatment is an important issue, a judge may order my testimony. Confidentiality is not protected when a judge makes such an order or in certain other legal procedures. Consult with an attorney if you are involved in a legal situation where such confidentiality may be at issue.

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6. If I am asked to provide services to your spouse, partner, or another member of your family, we will in advance establish the limits of confidentiality. It generally confines a practitioner's effectiveness when required to keep secrets, so my policy, in most circumstances, is that what you say and what we do can be shared with other family members with whom I am working. If this is what we establish, *do not tell me anything you wish kept secret* from other family members who are receiving sessions from me. If confidential information is a concern, it may be better for each family member to work with a different practitioner.

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7. I may occasionally find it helpful to consult other professionals about a client. During a consultation, I make every effort to avoid revealing the identity of the client. The consultant is also bound to keep the information confidential. If you don't object, I will

not tell you about these consultations unless I feel that it is important to our work together.

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While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, please discuss with me any questions or concerns that you may have. I will be happy to explore these issues with you, but formal legal advice may be needed from an attorney because the laws governing confidentiality can be quite complex.

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MINORS

My first responsibility is to follow and to uphold the laws of the state(s) in which I practice. If you are under eighteen years of age, please be aware the law may provide your parents or legal guardians the right to examine my records of our work together. It is my policy to request a written agreement from parents to waive their right to access your records. If they agree, I will provide them only with general information about our work together unless I feel there is a high risk you will seriously harm yourself or someone else. In this case, I will notify them of my concern. Before giving them any information, I will discuss the matter with you, if possible, and do my best to handle any objections you may have about what I am planning to discuss.

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PROFESSIONAL FEES

My fee for a 60-minute session is \$88.00. **Typically most sessions last for 90 min.,** at a rate of \$132.00. If we decide to meet for longer sessions or shorter sessions, I will bill you prorated on this hourly fee. The following is a sample breakdown of fees.

Initial 2 hr. session is a flat rate of \$150.00

60 min \$ 88.00

90 min \$132.00

120 min \$176.00

Additionally, I charge \$125.00 per hour for preparation and attendance at any legal proceedings.

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BILLING AND PAYMENTS

You will be expected to pay for each session at the time it is held unless we agree otherwise. Payment schedules for other professional services will be agreed to when they are requested.

Once an appointment is scheduled, you will be expected to pay for it unless you provide 24-hours' advance notice of cancellation. If you are late, we will still end on time and not run over into the next person's session. If you miss a session without canceling, or cancel with less than twenty-four hours' notice, you must pay for that session by the time of our next meeting unless we both agree that you were unable to attend due to circumstances beyond your control. In circumstances of unusual financial hardship, I may be willing to negotiate a payment installment plan.

If we have negotiated a payment installment plan and your account has not been paid for more than 60 days and arrangements for payment have not been agreed upon, I have the option of using legal means to secure the payment. This may involve hiring a collection agency or going through small claims court. If such legal action is necessary, its costs will be included in the claim. In most collection situations, the only information released is the client's name, contact information, dates and type of services provided, and the amount due.

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CONTACTING ME

I am often with a client or otherwise not immediately available by telephone. When I am unavailable, you will reach my voice mail. I monitor it frequently and will make every effort to return your call on the same day you make it, with the exception of weekends and holidays. If it will be difficult to reach you, please inform me of some times when you will be available. If you are unable to reach me and feel you can't wait for me to return your call, contact your family physician or, if you are experiencing a medical emergency, call 911 or go to the emergency room of a nearby hospital.

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OTHER ASPECTS OF OUR RELATIONSHIP

I Welcome Your Questions. You have the right to ask me questions about anything that happens in our work together. I'm always willing to discuss how and why I've decided to do what I'm doing, and to look at alternatives that might work better. You can feel free to ask me to try something you think will be helpful. You can ask me about my training for working with your concerns and can request I refer you to someone else if you decide I'm not the right practitioner for you. You are free to terminate our work together at any time.

Contacts, outside Our Work Together. I generally avoid social and business relationships with my clients. Our work together will be most effective when kept free from possible outside

entanglements. I, of course, never engage in sexual intimacies with clients. If you are a client who is a friend, I ask that our sessions together not be discussed in public. I will make every effort to keep all information confidential and may opt to ignore questions if the subject is brought up in a public situation.

Touch. Physical contact, even in a healing relationship, can be a sensitive matter because touch can be easily misinterpreted and feel too intimate, uncomfortable, or sexual in nature. Touching in a sexual manner is unethical within a professional healing relationship as well as illegal, and will never be a part of your treatment. Many of the methods I will use, however, are likely to involve touch. The theory behind such methods is that touching or holding points can assist me and you in identifying and shifting imbalances in your energies. At such times, you would remain fully clothed, with perhaps the exception of your shoes. I will always explain ahead of time where I will touch, and you can let me know if you are comfortable with it or not. I will always honor any requests not to touch.

Legal Proceedings. If you are involved in legal proceedings based on your having been traumatized, please understand the goals of our work together may involve healing the physical and emotional aftermath of the trauma. This could adversely affect your ability to provide legal testimony that would carry the same impact as it would prior to treatment.

Terminating Treatment. You normally will be the one who decides when our work together will end, but there are three exceptions to this. If I determine that I am unable, for any reason, to provide you with the services you are requesting at a high professional standard, I will inform you of this decision and refer you to another practitioner who may better meet your needs. Second, if you verbally or physically threaten or harass me, my office, or my family, I reserve the right to terminate you from treatment immediately and unilaterally. Third, I reserve the right to refuse or terminate a session if you or anyone in the session is suspected of being under the influence of a mood-altering substance. You will be responsible and charged for full payment of the normal fee.

Vacations. I am away from the office several times each year for vacations or to attend professional meetings. I will make every effort to tell you well in advance of any anticipated lengthy absences and to discuss other options for continuing to work toward your goals during my absence.

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Waiver Except in the case of gross negligence or malpractice, I or my representative(s) agree to fully release and hold harmless Christine Rollert from and against any and all claims or liability of whatsoever kind or nature arising out of or in connection with my session(s).

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COMPLAINTS

If you are unhappy with the way our work together is proceeding, I hope you will talk about it with me so I can respond to your concerns directly. I will take such concerns seriously and meet them with care and respect. You are also free to discuss any complaints about me with anyone you wish. You do not have any responsibility to maintain confidentiality about what I say or do. You are the person who has the right to decide what you want kept confidential. If you believe that I have been unwilling to listen and respond, or I have behaved unethically, you can register a complaint about my behavior with the organization that certifies me as an Eden Energy Medicine Practitioner:

Innersource

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Your signature below indicates that you have read the information in this document, understand it fully, have discussed any questions or matters of concern with me and/or others, and agree to abide by its terms during our professional relationship.

Print Name

Date

Signature