## Loveland Orthopedic Massage Alfred Westlake Jr NCTMB

## Policies & Procedures

These Policies have been created so that I may better serve you. Most of them are designed to help clarify our working relationship. I have tried to cover most of the issues that need attention. These policies are subject to change as situations change. You will always be notified of any change in how I conduct my practice. Please read and then sign below.

- 1) Be on time. I ask that you arrive for your session 5 minutes early. This way we can be sure that we start on time. All sessions will end at the scheduled time so that I can be ready for my next client. I will close the table work part of the session early enough so that you can dress and leave on time.
- 2) Payment is due at the time of service. I accept check or cash. I currently do not accept credit. I do accept tips for good service but I don't expect or in any way require them. You will be charged whatever fees I have to pay plus an additional \$10 for returned or "bounced" checks.
- 3) Because of the many hassles involved I no longer accept insurance. I can however supply you with receipts for your sessions and you can submit them to your insurance provider. I don't keep session notes or treatment plans. I cannot discuss your sessions with insurance providers without your explicit written permission.
- 4) Cancellation policy. If you give me less than 24 hr notice of cancellation you will be charged ½ of the session price. If you do not notify me at all and are a no show then full price is charged. I reserve the right to apply this policy as I see fit so that emergency situations or illness can be considered.
- 5) Please do not use intoxicants before your session. Take any prescription medication as directed but avoid over using pain killers. Often it is tempting to use intoxicants to help with relaxation. Because of the circulatory affects of Massage Therapy intoxicants can have a heightened effect which can be dangerous. In addition, it is important that you are able to feel what is happening during a massage session. Without proper feedback it is possible that you could receive too much pressure or range of motion during the session and be injured. If you arrive intoxicated for your session or it becomes apparent during the session that you are intoxicated, I will terminate the session and you will be asked to pay the full price of the session.
- 6) I like to have clear goals for the work I do. During your first session we will discuss your goals and how I can help. Periodically we will reassess these goals. Individual sessions may have different goals. Goals may also include simple relaxation after a hard week at work as well as more specific 'fix it' type goals.
- 7) After we have discussed the goals of the session I will leave the room so that you can disrobe and get on the table and cover yourself with the sheet and blanket. I will knock before I come back into the room to make sure that you are ready. You will be draped by the sheet at all times except for the area being worked on. I make every effort to help my clients feel safe and secure through proper draping techniques. You may choose to leave on any or all of your clothing, keeping in mind that this sometimes gets in the way of good treatment. Please let me know immediately any time you feel uncomfortable or overexposed during the session.
- 8) I am not a Chiropractor or a Physician. It is up to you to determine whether or not massage is safe for you and your condition. Bodywork is not a replacement for other care. I feel that bodywork is a great adjunct to other care. Chiropractic and Psychotherapy are two methods that go together very well with my work. It is your responsibility to determine what works for you. I can only give you my opinion based on my education and experience. <u>I cannot, nor is it legal for me to Diagnose conditions or Prescribe treatments.</u>
- 9) One of my specialties is movement and movement potential. I teach Internal Martial Arts and Breathwork (Tai chi, Bagua, and Qigong). I will often make suggestions about movement and breath based on this background. You are invited to attend my classes. I believe that they are a wonderful compliment to the Massage Therapy work that I do. You are under no obligation to do so and I will always strive to give you whatever information I think is useful whether or not you attend any of my classes.

## Policies & Procedures Continued

- 10) You may find during the course of our work together that issues come to the surface. It is normal to have some degree of emotional release with bodywork. This is one of the many benefits of Massage Therapy. I am a capable listener but I am not a Psychotherapist. Serious issues require the guidance that only a trained Psychotherapist or Counselor can give.
- 11) Confidentiality Statement (HIPAA disclosure) ~ Our sessions together are confidential. I will on occasion discus client issues and treatment plans with other professionals, I also occasionally write articles which make reference to cases I have worked with, but never in such a way as to reveal the identity of the client. I do not keep session notes. The only information I keep is your contact information, this form you are now reading, the intake form that you filled out, and a calendar of your sessions with the amounts you paid. Exceptions to client confidentiality are when I am required by law or by subpoena or in my own legal or professional defense to reveal information, or if you or someone else is in imminent danger. Other exceptions are with your explicit written consent.

## \_\_\_\_\_ Initial here to indicate that you understand and agree to the above Confidentiality Statement.

- 12) Notify me immediately of any communicable illness you might have so that I can take precautions to prevent the spread of disease. There are ways to work with most any condition. If you have a cold or flu in the contagious stages please call and reschedule, you will not be charged a late cancellation fee.
- 13) I reserve the right to refuse service without cause. Because of the intimate nature of massage therapy I reserve the right to not work with those who I deem it inappropriate or simply uncomfortable for me to work with. When possible I will give you a reference to another practitioner. Sexual overtures or other inappropriate behavior during a session will result in the termination of the session and you will be charged full price.
- 14) Minors (under age 18) may only receive massage with written consent from a parent or guardian. The parent or guardian must remain in the building for the duration of the massage session. The parent or guardian is responsible for determining the safety and appropriateness of massage therapy for the child. <u>I cannot, nor is it legal for me to Diagnose conditions or Prescribe treatments.</u> The parent or guardian is responsible for payment of service.
- 15) The Massage Session is for you and you are in charge. If the pressure is too deep or too light, or you don't like a particular technique, or I am missing the place that you want me to get, please communicate with me. Sometimes I will do techniques that don't seem to make sense given your stated goals, if I haven't already, ask me and I will explain. Some of the more intense 'fix it' work I do is uncomfortable. I always try to work within your tolerance level, please communicate to me if it is not. If you are uncomfortable in any way with any of the techniques I do let me know right away. If you want to end the session early for any reason let me know.
- 16) If you are in anyway dissatisfied with the work I do or have any complaint about my services, business practices or professionalism please bring it to my attention so that we can work it out. If you are still unsatisfied you may contact the Colorado Department of Regulatory Agencies (DORA), Office of Massage Registration to file a formal complaint.
- 17) I like to have closure with my clients. Sometimes people need change, or they want to try something else. Sometimes I have not met their needs, or have offended them in some way. Sometimes, dare I say, they heal and no longer need my services. Whatever the reason please communicate with me. Often we can work things out or I can suggest what your next step might be.

Thank you for reading the above policies. Please indicate that you have read and understood the above policies by printing then signing your name below. You will be given a copy of these policies for your reference.

Alfred S. Westlake Jr. NCTMB

| Print Name:  | Signature: | Date | _/ | _/ |
|--|------------|------|----|----|
| If under 18 this form must be accompanied by a Minor Consent Form: |            |      |    |    |
| Guardian Name:   | Signature: | Date | _/ | _/ |