



Transformational Acupuncture
1645 Connecticut Ave NW, 3rd floor
Washington, DC 20009
(202) 297-7404

Virtual Consultation Via Video Conferencing Consent Form

It may be possible and/or necessary for consultations regarding our services to occur via interactive video conferencing (i.e., virtual “face-to-face” sessions) in lieu of, or in addition to, “in-person” sessions. Video conferencing is a real-time interactive audio and visual technology that enables clinicians to provide certain health services remotely. These services may include, but are not limited to discussions of benefits of acupuncture treatments, lifestyle coaching, treatment option, and making recommendations regarding supplements and/or herbal treatments, in each case, as permitted by applicable law. The video conferencing system used by Transformational Acupuncture meets HIPAA standards of encryption and privacy protection but we cannot always guarantee privacy based on factors that may be outside of our control. You will not have to purchase a plan or provide your name when you “join” our online meeting.

Video conferencing may be a preferred method of consultation due to convenience, distance, or other circumstances. Although video conferencing may be used when the clinician and client are in different locations, licensure regulations only allow a session to be conducted in the state in which the clinician is licensed and the client is located. For purposes of Transformational Acupuncture, we have practitioners licensed in Virginia, Maryland, Delaware, and the District of Columbia.

Risks to video conferencing in general may include (but are not limited to): the technology dropping due to internet connections, delays due to connections or other technologies, or a breach of information security and/or confidentiality that is beyond our control. Clinical risks will be discussed in more detail with your clinician but may include discomfort with virtual face-to-face versus in-person treatment, difficulties interpreting non-verbal communication, and importantly, limited access to immediate resources if needed. Your clinician will weigh these advantages against any potential risks prior to proceeding with telemedicine sessions and will discuss the specifics of telemedicine with you before using the technology.

By signing the document below, you are agreeing that your provider may contact the necessary authorities in case of an emergency in the provider’s discretion. You are also acknowledging that if you believe there is imminent harm to yourself or another person, you will seek care immediately through your own local health care provider or at the nearest hospital emergency department or by calling 911.

We will confirm that we have the names and telephone numbers of your local emergency contacts including your primary care physician, emergency contact, and any other medical personnel necessary to your care.

A Note Regarding Billing:

You should be aware that we do not bill insurance for virtual consultations. This means that all services provided through virtual consultations must be paid by the patient “out of pocket”. Our rates are noted on our website.

By signing below, I acknowledge and indicate that I have read, or have had read to me, the above consent for virtual consultation via video conferencing, have been told about the risks/limitations and benefits of telemedicine/video conferencing, and have had an opportunity to ask questions. I am also aware that I will need to pay for virtual consultations out of pocket. I intend this consent form to cover the entire course of treatment for my present condition and for any future condition(s) for which I seek treatment with Transformational Acupuncture. I agree to virtual consultations via video conferencing.