



Lei Ann Resurreccion, MAOM, Lic.Ac.

WELCOME TO COSMETIC ACUPUNCTURE!

Introduction:

Welcome to Four Flowers Acupuncture & Oriental Medicine and congratulations on taking a big step towards your overall health! We say overall health because cosmetic acupuncture is not just skin deep. We still address your whole body, just like a regular acupuncture treatment, and not just treating your face or abdomen. So, not only will you start looking healthier and with more vitality, but you will feel the same way on the inside. Cosmetic acupuncture works by increasing qi and blood circulation to the area being needled which results in less wrinkles, smoother skin tone, tighter skin and increased elasticity. From the Western medicine viewpoint, needling can cause cells to release more collagen and elastin. Cosmetic acupuncture is less expensive, healthier and safer than modern procedures. It is virtually risk free with none of the side effects associated with surgery such as scarring, prolonged bruising or numbness.

What to Expect:

For optimal results, treatments are scheduled twice a week for 5 weeks (10 treatments), but more may be needed depending on your skin condition. If you need results faster (like for a big event), ask your practitioner about other possible schedules.

Your first consultation will include an overview of your health in regards to Chinese medicine. We will discuss the influence of diet, exercise and lifestyle as it relates to your particular condition. Once we have completed the initial overview, you will be given suggestions to help you on your way to better skin health which may include Chinese herbal medicine, nutritional counseling, exercise recommendations and skin care regimen, in addition to acupuncture.

Each treatment takes from 45 to 60 minutes.

Results can last from 3 to 5 years. After the initial 10 treatment regimen, a maintenance schedule can be tailored to your needs.

Fees:

| | |
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| Initial Visit (1 ½ hrs): | \$150.00 |
| Follow Up Visit (1 hr): | \$125.00 |
| Skin care products or herbal products are extra. | |

Procedure:

Photographs will be taken pre-treatment, at the 5-week visit and post-treatment, as well as measurements if you are undergoing the abdominal protocol. These will be kept in your chart to document your progress. We will only take close-up pictures of problem areas that would not identify you.

If you would prefer **NOT** to have any photographs taken, please sign your initials here _____. Before and after pictures may be used for marketing purposes, but only with your expressed, written consent.

Before treatments:

1. Before your first treatment, have a facial done. This will help cleanse the skin and prepare it for needling.
2. Please remove all makeup/foundation before a treatment. You may bring makeup to reapply after.

During treatment:

1. You will first be diagnosed and treated with body points according to your underlying Chinese constitution. This will help to support the cosmetic work.
2. Your skin will be cleansed with a skin toner to remove any dirt/oil prior to needling. If you have your own products that you prefer to be used, feel free to bring them in.
3. Small needles are shallowly inserted into various acupuncture points on your face or abdomen. Your comfort will be assessed at all times.
4. On rare occasions, bruising may occur which may last a few days.

After treatments:

1. If bruising does occur, arnica facial oil may be applied to your face to minimize the bruising.
2. Please bring the sunscreen product you usually wear to apply after a treatment.

Only one protocol, either the face or abdomen, should be done within one 10-treatment series. However, you may start with one treatment and then begin the other after that period of time.

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INFORMED CONSENT FOR COSMETIC ACUPUNCTURE

I acknowledge that I, the undersigned, voluntarily participate in the treatment of cosmetic acupuncture at Four Flowers Oriental Medicine. I acknowledge that no statistics, results or success rates are guaranteed in reference to treatment of the face and abdomen with cosmetic acupuncture. I acknowledge that many factors contribute to skin health including cigarette smoking, excessive alcohol intake, poor sleep and excessive sun exposure, among others, and that all can negatively impact the end result of cosmetic acupuncture.

I acknowledge that the following are contraindicated for facial acupuncture and that they do not apply to me.

1. Frequent migraine headaches (at least one every 3 months)
2. Uncontrolled high blood pressure (does not apply if you have high blood pressure controlled with medication and are under the care of your primary care physician)
3. Seizure disorders
4. Problems with bruising or bleeding (like on anticoagulation therapy)
5. Pregnancy

I acknowledge that the following are contraindicated for abdominal acupuncture and that they do not apply to me.

1. Uterine cysts/fibroids
2. Problems with bruising or bleeding (like on anticoagulation therapy)
3. Pacemaker placement
4. Pregnancy

While there are no lasting ill side effects from acupuncture, I acknowledge that facial acupuncture can result in bruising which may last a few days or may result in more permanent pigmentation. I understand that facial work brings blood and qi (energy) to the face, so I may leave a treatment with red spots on my face which will dissipate.

I acknowledge that cosmetic acupuncture still treats the whole body, so I may not be ready for facial acupuncture until my underlying conditions are addressed suitably enough to gain the maximum benefit from the facial acupuncture. I understand that this may take a few treatments involving just body points and/or herbal medicine before the facial work can begin.

I have read all of the above and understand the risks and benefits of acupuncture treatment.

Signature of Patient **X** _____ Date _____

Print Name _____

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COSMETIC ACUPUNCTURE QUESTIONNAIRE

Name _____

Date _____

Please describe your main skin complaint.

What improvements would you like to see?

Please describe any skin sensitivities or allergies.

Please describe your current skin care regimen and products that you use. (toner, astringent, exfoliation, masks, etc.)

Do you wear makeup daily? yes / no

Do you wear sunscreen daily? yes / no

What procedures have you had or are currently undergoing? (Botox, collagen, laser, micro-dermabrasion, surgery, post-partum, etc.) Please include dates.

Please describe any other skin conditions/issues you have.