

Alyson Munkley, ND
416-921-3837

MUTUAL UNDERSTANDING AND CONSENT TO TREATMENT

The following information is provided to enable our sharing of a common understanding of our rights and roles in this professional therapeutic relationship. Please read this agreement and sign at the end indicating that you have understood and agreed to the following.

- Information revealed during counseling and discussion sessions is confidential. Exceptions to this confidentiality include disclosure by you regarding intention to harm yourself or others. Your record and the information within will not be disclosed to others unless you direct us to do so or unless the law authorizes or compels us to do so.
- Each procedure and or treatment carries with it both benefits and risks. There may be additional or alternative treatments available. You are encouraged to ask questions if you would like additional information. Although your plan will be thoroughly researched and will be customized to your unique health status and your personal goals, no guarantees are expressed or implied regarding the outcomes of treatments or procedures.
- Full payment is due at the time of your visit. You are responsible for payment regardless of insurance coverage.
- Your naturopathic doctor (ND) is not available on a 24-hour basis. For this reason, if you have a serious health problem that requires immediate attention, please seek emergency medical care or call Telehealth Ontario, at 1-866-797-0000. If you notice adverse effects from one of the components of your health plan, discontinue it immediately, and notify your ND to inform her of your symptoms.
- Please let your ND know if you are being treated by other health care providers. It is your responsibility to disclose changes in your condition, symptoms, contact information or treatments between visits.
- Physical examination, naturopathic manipulations, and massage may result in injury and does involve physical contact, which may be uncomfortable for some persons. If you are uncomfortable with physical contact please let your ND know so she can help you find an alternative that is more comfortable to you.
- You are encouraged to ask questions on any health-related topic and to take an active role in your health care. Natural treatments may involve encouraging you to make changes to your diet and lifestyle that can help you attain your highest level of health.
- It should be understood that full compliance with the recommended treatment plan is essential for achieving the best health outcomes.
- **24 hours is required for cancellations, otherwise a cancellation fee of 50% of the visit fee will be charged.**

The contact information, health history, and other information that I provided on my intake form are complete and accurate. I understand and agree to the information on this page. My questions, if any, were answered to my satisfaction.

SIGNATURE of patient or guardian

Date