



Policies, Privacy Rights & Informed Consent

24-hour Cancellation Notice Required

If a client wishes to cancel or reschedule their service, a 24-hour notice is required to avoid being charged for 50% of the amount of their scheduled service.

Policies on Length of Treatment Session for Out-Call Services

In general, a 60-minute massage session takes approximately 1hr 40 mins. Your therapist will **arrive 15-20 before the scheduled time**, set up the massage table in the location desired by the client, and perform a health intake to establish treatment goals. The massage is 60 minutes followed by approximately 10-15 minutes for evaluation of the session and removal of equipment. Time adjustments for all other services should be made in a similar manner. If the client is responsible for delaying the start of treatment, they will be charged the full amount for the session time and the session will end at the originally scheduled time.

Notice of Privacy Practices

This notice of privacy practices is given on behalf of all of the therapists at **Retreat Mind & Body**. This Notice of Privacy Practices is required by regulations (the "Privacy Rule") established under federal law (the Health Insurance Portability and Accountability Act, "HIPAA".) **Retreat Mind & Body** is committed to protecting your medical information and using such information appropriately. This notice is intended to inform you of the ways in which **Retreat Mind & Body** may use and disclose your protected health information and to describe your rights regarding the disclosure of your protected health information. **Retreat Mind & Body** is required by the Privacy Rule to maintain the privacy of your protected health information. The Privacy Rule requires that **Retreat Mind & Body** provide notice of its privacy practices to all of its clients.

Uses and Disclosure of your Protected Health Information

- Your protected health information is kept confidential and not disclosed to anyone without your written consent, authorization or as specifically allowed by law.
- **Retreat Mind & Body** may use your protected health information to provide you with safe and effective massage therapy treatments. Our practitioners will need access to your medical records to determine if you have chronic conditions or a medical history that would affect your treatment.



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- As required by law, **Retreat Mind & Body** is permitted to disclose your protected health information when required to do so by federal, state, local law, regulatory or accreditation agencies.
- Practitioners may contact you by phone, mail or e-mail to inform you of scheduling conflicts and opportunities.
- Examples of Required disclosure:
 - Victims of Abuse, Neglect or Domestic Violence
 - The Privacy Rule authorized **Retreat Mind & Body** to notify the appropriate government authority if **Retreat Mind & Body** believes a client has been the victim of abuse, neglect or domestic violence. **Retreat Mind & Body** will only make this disclosure if you agree or when authorized by law.
 - Law Enforcement and Judicial Proceedings
 - The Privacy Rule allows **Retreat Mind & Body** to disclose confidential protected health information in response to a court or administrative order. **Retreat Mind & Body** may also disclose your protected health information in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested.

Rights Regarding Your Protected Health Information

- You have the right to request that **Retreat Mind & Body** communicate with you about your protected health information in a certain way at a certain location, for example, at home, at work or by mail at a specific address.
- You have the right to inspect and copy a designated set of treatment records. **Retreat Mind & Body** may charge a reasonable fee for the costs of copying and mailing information associated with your request.
- If in your opinion your treatment records are incomplete or incorrect, you may request that **Retreat Mind & Body** amend your records. Your request for amendment must give reasons for an amendment in writing. **Retreat Mind & Body** may deny amendments if the records are deemed to be accurate and complete.



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- All requests for copies of your personal protected health information must be made in writing.
- If you believe your privacy rights have been violated, you may file a complaint with **Retreat Mind & Body** and/or with the Federal Department of Health and Human Service.

Informed Consent

I understand that massage therapy is intended to enhance relaxation, reduce pain caused by muscle tension, improve and increase circulation and provide a positive experience with touch. The massage therapy treatment may include Deep Tissue, Swedish massage techniques, myofascial techniques, Shiatsu techniques, Passive Range of Motion, and Site Specific Applications such as Trigger Point Therapy and acupressure techniques. I am aware that my massage practitioner does not diagnose disease or illness, prescribe medications or perform skeletal manipulations. I comprehend that I **may terminate a massage session at any time** if I feel uncomfortable with the course of treatment being administered. The general benefits of massage therapy, possible contraindicating factors, and a treatment plan have been explained to me. I realize the health benefit of massage therapy are not guaranteed, nor is massage therapy intended to be a substitute for supervised medical treatment by a medical doctor. I have informed my massage therapist of all my known medical conditions and I agree to inform my massage therapist of any changes in my health or prescriptions as they occur.

I acknowledge receipt and comprehension of the Retreat Mind & Body policies for services and agree to the policies stated above.

Client Signature: _____ **Date:** _____

Massage Therapist Signature: _____ **Date** _____