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Dry Needling Consent Form**

Dry Needling (DN) involves inserting a thin/flexible monofilament needle into symptomatic tissue to reduce pain and improve function. Benefits from DN can be experienced immediately or over a few days to weeks. DN is not Traditional Chinese Acupuncture. DN is based on anatomy, neurology, and physiology. DN has some risks that can occur with the treatment. In the hands of a skilled professional, these risks are small, but you should still be aware of the potential adverse events. The most likely adverse events are listed below by their level of severity (“Serious”, “Significant”, and “Mild”) and how often it may occur (“Common” <10%, “Uncommon” <1%, and “Rare” < 0.1%).

|  |  |  |
| --- | --- | --- |
| **Adverse Event** | **Likelihood** | **Additional Information** |
| Serious Risks (may require hospitalization) |
| Collapsed Lung (Pneumothorax) | Rare | Symptoms may include shortness of breath or chest pain that can last for many days to weeks. A more severe lung puncture can require a visit to the hospital. |
| Fainting (Syncope) | Rare | Symptoms leading to fainting may include sweating or feeling lightheaded or dizzy. Let your healthcare provider know if you have any of these symptoms while being treated. People usually recover quickly but a medical exam may be needed if problems occur.  |
| Significant Risks (May continue for days/weeks and can require medical care) |
| Bleeding under skin resulting in a bump (Hematoma) | Uncommon | May result in a bruise. |
| Nerve Injury | Uncommon | May cause temporary numbness, tingling, weakness, or sensation changes. Needles are small, flexible, and do not have a cutting edge. Significant tissue trauma is unlikely. |
| Skin Irritation | Rare | Local redness, small bumps, and itching that may last a few hours.  |
| Mild Risks (May cause temporary symptoms and little inconvenience) |
| Bleeding (Droplet) | Common | Droplet is cleaned by healthcare provider but it may result in a bruise. |
| Bruising | Common | May last a few days  |
| Sweating (Diaphoresis) | Common | Usually occurs during or after treatment and may last minutes to a few hours |
| Dizziness | Common |
| Fatigue | Common |
| Drowsiness | Uncommon |
| Temporary Symptom Increase  | Common | Usually occurs during or after treatment and may last a few hours up to a few days. |
| Pain During/After | Common |
| Soreness | Uncommon |

There are other conditions that require consideration so please answer the following questions:

* Are you taking blood thinners? Yes / No
* Are you pregnant? Yes / No
* Are you receiving any treatments or have a medical condition effecting your immune system? Yes / No
* Do you have any known disease or infection that can be transmitted through bodily fluids? Yes / No
* Have you experienced an allergic skin reaction to metals like chromium or nickel? Yes / No
* Do you have any medical devices or implants anywhere in your body? Yes / No
* Have you had any surgical procedures? Yes / No

**Patient’s Consent:**

I have read and fully understand this consent form and attest that no guarantees have been made on the success of this procedure related to my condition. I am aware that multiple treatment sessions may be required, thus this consent will cover this treatment as well as subsequent treatments by this facility. All of my questions, related to the procedure and possible risks, were answered to my satisfaction. My signature below represents my consent to receive dry needling and my consent to any measures necessary to correct complications, which may result. I am aware I can withdraw my consent at any time.

I,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, read and understand the risks, all of my questions have been answered, and I am willing to be treated with dry needling.

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Patient or Authorized Representative Signature Date

 I was offered a copy of the consent form and refused.