## Momentum Medicine Plus Acupuncture

Consent For Medical Acupuncture	
by Dr. Juan Carlos Cornejo, a medial physician.	by request and consent to the performance of acupuncture treatment (s). Although he is not an acupuncturist, he is a medical physician who are and is allowed to perform medical acupuncture in the state of NJ.
may also have a part in the treatment of certain of	c points on the body to relieve pain and modify perception of pain. It diseases. Acupuncture is performed by mechanical stimulation by a ctrical currents. Although acupuncture is still considered an alternative A has approved acupuncture needles.
needle insertion, infection, bleeding, bruising, sv	risks including but not limited to the following: pain at the site of welling, weakness, fainting, drowsiness, nausea, and possible ncture treatment, spontaneous miscarriage, nerve damage, and
Practioner Must be Aware of certain condition It is imperative that you let the physician know of the second of th	of the following: or passing out episode implant aking anti-coagulants(blood thinners) or any other mediation had heart valve replacement emotherapy, or have low immunity
<ul> <li>treatment, at any time.</li> <li>I understand that acupuncture usually requir</li> <li>The patient understands there is no guarante</li> </ul>	or reject the proposed acupuncture treatment or any other medical res several treatments for improvement of the medical condition. The about the results of the acupuncture treatment.  The disposable sterile needles that are used ONLY one time and then are
related questions, and, to the best of my kno concerning the benefits and risks associated	document to the patient and have answered all the patient's whedge, I feel the patient has been adequately informed with medical acupuncture. After being adequately informed, the he acupuncture in the manner indicated above.
Physician's Signature:	
TREATMENT, OR ANY QUESTIONS V	O THE RISKS OR HAZARDS OF THE PROPOSED WHATSOEVER CONCERNING THE PROPOSED TREATMENTS, ASK YOUR DOCTOR NOW BEFORE
Patient's Signature: X	(or person with authority to consent for patient)