



Homeopathy – Adult Consent Form

*Your Homeopathy treatment is a partnership between us,
built on mutual trust and respect.*

*I encourage you to be open about your health and lifestyle, past and present.
Your consultations are always entirely confidential.*

Your data is kept securely at all times.

What to Expect from your Homeopathic Treatment:

Your Homeopathy consultations are a space for you to discuss your symptoms in the context of your daily life. Your schedule, routines, sleep habits, nutrition, skin-care and exercise all have an impact on how you're feeling.

- Homeopathy is a process whereby the body is gently stimulated to heal itself.
- Your treatment is tailored to you as an individual.
- Your progress will depend on the severity of your symptoms at the start of treatment.
- The body needs time to heal symptoms that have been suppressed with medication.
- You can expect to see positive changes in your sleep, mood and energy from the beginning and steady progress with physical symptoms alongside.
- Symptoms previously experienced may reappear during your treatment. This is part of the Homeopathic "Law of Cure" and indicates a deeper healing is taking place.

Small changes make a big difference over time.

My Commitment to You:

I will work with you and for you. I will be honest, open, non-judgmental and professional. If you have any queries regarding your Homeopathy treatment, I am available by e-mail at no extra charge (catherine@homeopathyheals.ca). I endeavour to reply to e-mail the same day but certainly within 48 hours of receipt. If your question warrants a formal consultation, I will advise you accordingly.

Your Commitment to Me:

You agree to value and prioritize your appointments as this is time I have set aside specifically for you. You will let me know if you have any concerns about our work together.



Payments:

Payment is expected at the beginning of each consultation and may be made by cash, cheque, credit card or e-transfer. You will be provided with a receipt for your payment.

Cancellation Policy:

My practice days are Monday, Tuesday and Thursday. I ask for at least one working days' notice for cancellation or re-scheduling. A 50% fee may apply to late cancellations depending on the circumstances.

Emergencies:

At any time, during any illness or form of treatment, if you experience an immediate medical emergency, please call 911 or visit your local emergency department.

Definitions and Prices

Acute Condition: one that usually begins quickly and is of relatively short duration, *eg* cold, flu, earache, injury, trauma, *etc.*

Chronic Condition: one that develops slowly over time, *eg* arthritis, anxiety, depression, chronic fatigue syndrome, fibromyalgia, repeated migraines, menstrual difficulties, *etc.*

Telephone Consultation to Determine whether Homeopathy is right for you (30 minutes): Free

Chronic Disease Intake (2 hours): \$160.00

Follow-up (30 minutes): \$60.00

Acute Disease Intake (30 minutes): \$60.00

In consenting to Homeopathic Treatment, I understand that:

1. An intake form must be completed by me prior to the initial consultation. (This provides the Homeopath with information about my current symptoms and relevant medical history and helps us to use first consultation time together more productively.)
2. For chronic conditions, I will be expected to attend (in person or online) the initial consultation (approximately 2 hours in length) followed by shorter follow-up appointments (approximately 30min-1h), usually weeks apart, the number of appointments as determined by my progress.
3. I can expect to receive my Homeopathic Medicine (for a chronic condition), complete with instructions for taking the medicine, within 48 hours of my initial appointment. (My prescription may change throughout treatment, depending upon my symptoms, but I will be informed if there is a change in Homeopathic Medicine.)



4. For acute conditions, both the initial and follow-up appointments will be shorter in length and closer in time until the acute condition is resolved. The Homeopathic medicine will be provided as soon as possible.
5. I understand that Catherine Elliott is a registered practitioner of Classical Homeopathy and not a licensed medical doctor. As such, I acknowledge that it is my responsibility to seek medical diagnosis and advice for my present and future conditions. In consulting with Catherine Elliott, I am exercising my right to choose a complementary method of treatment through which to address my total health.
6. I acknowledge that all personal information will be kept confidential and any questions I may have during my treatment, may be directed to my Homeopathic practitioner.
7. I understand that Homeopathy is not currently an OHIP-insured service; thus, there are fees that apply. I have reviewed the fee schedule that was provided for me. I understand that the cost of each Homeopathic Medicine is *included* in the consultation fee.
8. I understand that I can choose to discontinue treatment at any time but have been advised to discuss such a decision, in advance, with my practitioner, so that options in my best interest can be considered and discussed.
9. All my questions regarding Homeopathic Treatment (and the process) have been answered to my satisfaction.
10. I have read, understood, and agree to the above requirements.

Signature: _____ Date: _____

Name (printed): _____