



Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

SS# (if using insurance): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

Age: \_\_\_\_ Height: \_\_\_\_ Occupation: \_\_\_\_\_ Email: \_\_\_\_\_

Personal Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Fee Schedule:

* Initial Consultation	\$195.00	90 Minutes
* Follow-up Treatment	\$175.00	90 Minutes
* Follow-up Treatment	\$130.00	60 Minutes
* Herbal Consultation	\$75.00	30 Minutes
* Electro-Stimulation	\$27.40	Per Unit
* Children Consultation	\$195.00	90 Minutes
* House Call	\$300.00	90 Minutes
* Injections	\$40 & up	

Payment is expected at the time of treatment unless prior arrangements have been made. A sliding fee scale is available upon request.

Disclosure:

This disclosure is in compliance with the State of Colorado Dept. of Regularity Agencies, Senate Bill 92.6. All rules and regulations set forth by the Dept of Health are strictly adhered to by this clinic, including proper cleaning and sterilization of the office and equipment.

The practice of acupuncture is regulated by the Dept. of Regulatory Agencies. Any complaints should be directed to:  
Dept. of Regulatory Agencies, Acupuncture Division  
1560 Broadway, Suite 1350  
Denver, CO 80202  
(303) 894-7851

I Dr. Aaron Nickamin have never had any license, certification or registration suspended or revoked.

Patients are entitled to receive information about methods of therapy, techniques used and the duration of therapy, if known. Any services offered by Aaron Nickamin are not intended to substitute for those offered by a licensed medical doctor when needed. Patients may seek a second opinion and may terminate therapy at any time. In a professional relationship, sexual intimacy is never appropriate. Misconduct should be reported to the director of the division of registrations at the Dept. of Regulatory Agencies.

I understand that complications may result from acupuncture treatment. Among the possible complications are: numbness, nausea, fainting, weakness, bruising, infection, pain and discomfort, pneumothorax and aggravations of present symptoms. The client further understands and agrees to hold harmless to indemnify and protect against court action, Dr. Aaron Nickamin, L.Ac, in the event of accidental injury on these premises.



**EDUCATION**

1994 University of Arizona-Tucson, AZ Bachelors of Health Related Professions-Physical Education with a combined minor of Special Education & Rehabilitation.

1994 1st San Black Belt, Traditional Tae Kwon Do, Pima Community College, Tucson, AZ.

1996 Phoenix Therapeutic Massage College-Therapeutic, Sports and Swedish

1998 Jin Shin Jyutsu Practitioner, 2nd level Usui Reiki

2003 Emperors College of Traditional Oriental Medicine - Santa Monica, CA. - Masters of Traditional Oriental Medicine, Yai Qi Chuan and Qi Gong.

2012 Wat Pro Trad. Thai Massage & Yoga Thai Massage, Bangkok & Chiang Mai, Thailand.

2000-2014 Shen/NeoClassical pulse diagnosis study, Will Morris, ph.D, DAOM, L.Ac.

2009-2011 Allergy Elimination apprenticeship - Robin Cupp, L.Ac., Tucson, AZ.

2012 - Neural Prolotherapy/Lyftogt Tech. Il., USA.; 2013 Guadalajara, MX.

2013 American College of Traditional Chinese Medicine - San Francisco, CA. - Doctor of Acupuncture and Oriental Medicine (woman's health/pediatrics/pain mngmt,).

2014 Koren Specific Technique (KST). San Diego, CA.

2014 Neural Therapy - Jeff Harris, ND. Boulder, CO.

Professional Experience:

1994 Elementary Adaptive Physical Education Specialist, Amphitheater Public Schools, Tucson, AZ.

1996 Scottsdale Princess Resort and Spa, Scottsdale, AZ. - massage therapist.

1999-2008 WIN Health Institute, senior acupuncturist/Chinese herbalist, massage therapist. Basalt, CO.

2009-2014 East meets West Preventative Medicine - private practice, Roaring Fork Valley, CO.

2013-2016 AAOM - Cancun, MX., 2013-2016 LAOM Lima, Peru & 2014 AAOM Guadalajara, MX. - prolotherapy missions.

2015 Jin Shin Jyutsu Animal Practitioner Certification (acupressure)

2015 Animal Acupuncture Certification Program- Maryland University of Integrative Health, Laurel, MD.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_



Chief Complaint ( describe in detail):

History of Chief Complaint:

Past Medical/Surgical History:

Allergies:

Family Medical History (siblings, parents, grandparents):

History/Habits/Risk Factors:  
Medical/Supplements

Tobacco (If so, how much?):  
Alcohol (If so, how much?):  
Drugs (If so, what drugs?):  
Coffee/Sodas (if so, how much?):

Please use the following marks to indicate if you have any of the following symptoms:

- C - Currently or recently experienced the symptoms
P - Have experienced the symptoms in the past

Energy:
\_\_ Good energy
\_\_ Poor energy
Energy drop at \_\_ p.m.

\_\_ Loose stools
\_\_ Constipation
\_\_ Hemorrhoids
\_\_ Painful movements

Urinary:
How many times/day \_\_
\_\_ Wake up to urinate
\_\_ Painful
\_\_ Urgent
\_\_ Blood in urine
\_\_ Cloudy
\_\_ Strong odor
\_\_ Incontinent
\_\_ Bed wetting

Digestion:
\_\_ Poor appetite
\_\_ Excessive appetite
\_\_ Thirst
\_\_ Lack of thirst
\_\_ Abdominal pain
\_\_ Gas, bloating
\_\_ Nausea,vomit
\_\_ Belching
\_\_ Bad breath
\_\_ Heartburn
\_\_ Indigestion

Cardiovascular
\_\_ High blood pressure
\_\_ Chest pain
\_\_ Palpitations
\_\_ Swollen hands/feet
\_\_ High Cholesterol

Temperature:
\_\_ Tend to feel hot
\_\_ Tend to feel cold
\_\_ Feel feverish
\_\_ Flushed face
\_\_ Cold hands & feet

Stool:
\_\_ Diarrhea

Skin:
\_\_ Dry skin
\_\_ Oily skin
\_\_ Itchy skin
\_\_ Rashes
\_\_ Eczema
\_\_ Pimples
\_\_ Bruise easily



- Ears:
- Loss of hearing
  - Ringing in ears
  - Ear aches

- Restless sleep
- Wake up tired
- Wake up refreshed
- Too much sleep

- Head:
- Headaches
  - Migraines
  - Dizziness
  - Concussions

- Eyes:
- Dry eyes
  - Itchy eyes
  - Red eyes
  - Blurred vision
  - Floaters/spots in eyes
  - Eye pain

- Respiratory:
- Shortness of breath
  - Asthma
  - Cough
  - Wheeze
  - Tight chest
  - Phlegm production
  - Sigh a lot

- Nose:
- Runny nose
  - Allergies
  - Sinusitis
  - Nosebleeds

- Throat:
- Sore throat
  - Swollen glands
  - Dry Throat
  - Lump in throat

- Pain:
- Neck/shoulder pain
  - Upper back pain
  - Low back pain
  - Spinal problems
  - Sciatica
  - Joint pain
  - Arthritis

- Mouth:
- Dry mouth
  - Weird taste in mouth
  - Gum problems
  - Tooth problems
  - Mouth sores
  - Grind teeth
  - T.M.J.

- General:
- Catch a cold easily
  - Tremors/shakes
  - Poor memory
  - Numbness/tingling
  - Loss of weight

Other: \_\_\_\_\_

- Emotional:
- Generally happy
  - Tend to be sad
  - Easily angered
  - Easily stressed
  - Fearful
  - Anxious
  - Hold emotions in
  - Depressed

- Sleep:
- Insomnia
  - Troubling falling sleep
  - Wake in middle of night
  - Dream disturbed sleep

- Sexual:
- Low sex drive
  - Seminal emission
  - Impotence
  - Herpes
- Other: \_\_\_\_\_

- Gynecology:
- Age at fist menses \_\_\_\_\_
- Number of times pregnant \_\_\_\_\_
- Type of birth control used \_\_\_\_\_
- Vaginal discharge \_\_\_\_\_
- Length, in days, of menstrual cycle \_\_\_\_\_
- Days of flow: \_\_\_\_\_ Amount of flow \_\_\_\_\_
- Color of flow \_\_\_\_\_ Clots \_\_\_\_\_
- Pain \_\_\_\_\_ P.M.S \_\_\_\_\_

- Pain:
- Rating: 1 2 3 4 5 6 7 8 9 10
- Quality: dull, sharp, achy, throbbing, stabbing, burning, other \_\_\_\_\_
- Parasthesia: numbness, tingling, prickles, loss of feeling, other \_\_\_\_\_
- Mobility: normal, stiff, limited, other \_\_\_\_\_
- Muscle strength: normal, weak, other \_\_\_\_\_
- Misc: swelling, discoloration, temp, changes, fractures, other \_\_\_\_\_

Thank you! You have finished a long and somewhat arduous task.

推拿  
中醫  
針灸



## Preventative Medicine

### Dr. Aaron Nickamin

DAOM, AP, L.Ac, LMT, JSJP, JSPAP, CAA, KSTP.

655 East Valley Rd. Suite 220  
Basalt CO 81621  
emwpm.com  
(970) 309-0849

Payment is due at the time of service. 100% of fee is charged for missed or canceled appointments without 24 hour notice or 48 hours notice for any Monday appointments. There will be a fee of \$35.00 plus the original amount for insufficient funds. I understand and agree to abide by this policy.

I verify that I know of no disability or physical condition that would be aggravated or disturbed by the receipt of bodywork. I understand bodywork is an adjunctive therapy that can be coordinated with any advice, treatment or prescriptions recommended by my regular health care practitioner. I understand that no sexual activity will be offered nor tolerated and the session will be terminated immediately if this agreement is broken. All information given is true to the best of my knowledge.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

We require Credit Card information for our records to hold any appointments and for our cancellation policy.

\_\_\_\_\_ exp \_\_\_\_\_

If you would like to be notified for any specials or appointment reminders via email please write down your email address.

\*Client information is confidential and will not be shared outside of the clinic\*



Whenever a needle is introduced through the skin, inherent risks are present. Although the risks are small, the expected benefit from the procedure must outweigh the possible risks. Make sure that you have thorough understanding of the expected benefit from the injection. The risks of injection depend on where the injection is made and what is being injected. If the injection is made in a large muscle, the risk of hitting vital structure is very small. Injections in the area of neuromuscular bundles ( where nerves, veins, and arteries travel together ) have a higher risk of injury, and injections in the area of the lung organs have a higher risk of injuring them.

**The risk of injection are:**

**Infection:** with current standard procedure of sterile needles and antiseptic technique, the risk is very small, but it still exists. Redness and swelling are the early signs of infection. Any redness or swelling should be reported immediately to avoid the more serious implications of sepsis (bacteria in the blood stream) or osteomyelitis (infection of the bone).

**Puncture:** of nerves, arteries, or veins: This risk varies greatly on the area of injection. When acupuncture point injections are made in the body of large muscles, the risk is very small. In other areas where these structures are larger and running together, the risk is increased. A nerve may be permanently damaged or bleeding may occur with puncture of a vein or artery.

**Puncture of a lung or vital organ:** Injections in the area of the chest could puncture a lung in which the serious complication of a tension pneumothorax could occur. In this condition the lung leaks air into the lung cavity progressively compressing the heart and lung. The person becomes short of breath, which can advance to death if untreated. Puncture of other vital organs is extremely unlikely and depends on site of injection.

**Allergic reaction to injected substance:** Allergic reactions to homeopathic substances have not been reported, and, in fact, they are used to treat allergic conditions. However, the possibility still exists. An allergic reaction is usually hives, but a lung reaction could occur with severe shortness of breath, or the most serious reaction is anaphylaxis. In anaphylaxis there is an acute onset of shock, and this is a serious life threatening emergency that could result in death.

**INFORMED CONSENT AND AGREEMENT**

I, \_\_\_\_\_, hereby request and consent to injection therapy on my body, in order to enhance the effect of stimulating an acupuncture point. I understand that I will only be injected with substances that fall within the scope of practice of Licensed Acupuncturists in Colorado, I understand the risks involved. I do not expect my practitioner to be able to anticipate all risks and complications. By signing this form, I agree to accept all risk and release all liabilities from Aaron Nickamin, L.Ac., and Aspen Integrative Medicine.

Patient's Signature: \_\_\_\_\_ Date \_\_\_\_\_

(or representative) Relationship \_\_\_\_\_



Tongue:

Pulse:

Right-

Left-

Diagnosis:

Treatment principle:

Acupuncture:

Herbs:

Notes: