MARYLANGFIELD Health History Form

CLIENT BILL OF RIGHTS

State Of Minnesota Complementary And Alternative Health Care Client Bill Of Rights

Mary Langfield LLC is a single member limited liability company formed in the State of Minnesota, located at 3541 Bloomington Ave., Minneapolis, MN 55407, 612-801-8900, owned and operated by Mary Langfield Neaton, a classical homeopath, holistic health coach and yoga teacher. Mary has a Bachelor's Degree in Communications and has completed a health coach training program at the Institute for Integrative Nutrition. She is a registered yoga teacher with Yoga Alliance, having completed a 500-hour yoga training program at Devanadi School of Yoga and Wellness. She has a certification as an Ayurvedic Specialist from the Himalayan Institute. Mary is considered an unlicensed complementary and alternative health care practitioner.

THE STATE OF MINNESOTA HAS NOT ADOPTED ANY EDUCATIONAL AND TRAINING STANDARDS FOR UNLICENSED COMPLEMENTARY AND ALTERNATIVE HEALTH CARE PRACTITIONERS. THIS STATEMENT OF CREDENTIALS IS FOR INFORMATIONAL PURPOSES ONLY.

Under Minnesota law, an unlicensed complementary and alternative health care practitioner may not provide a medical diagnosis or recommend discontinuance of medically prescribed treatments. If a client desires a diagnosis from a licensed physician, chiropractor, nurse, osteopath, physical therapist, dietitian, nutritionist, acupuncture practitioner, athletic trainer, or any other type of health care provider, the client may seek such services at any time.

Mary's theoretical approach to providing services to her clients is to draw upon her experience and training in classical homeopathy, dietary theories, lifestyle management and innovative coaching methods to help clients make changes that produce positive and lasting results to their health.

Mary's fees depend on the specific program or services being provided. Prior to working with any client, Mary explains fees per unit of service and method for billing. Mary does not receive reimbursement from any insurance company or health maintenance organization. Mary does not accept Medicare, medical assistance, or general assistance medical care. Mary does not accept partial payment for services.

Services such as those provided by Mary, and other services that may be used for treating your health condition may be available in the community and you are encouraged to consult with other health care providers, including your local hospital or health care clinic for resources on the availability of these services.

Client Rights

You have the right to file a complaint with the practitioner's supervisor, if any. Mary does not have a direct supervisor.

You have the right to file a complaint with the Office of Unlicensed Complementary and Alternative Health Care Practice, P.O. Box 64882, Saint Paul, Minnesota 55164-0882 (mailing address), 651-201-3721 (phone).

You have a right to reasonable notice in changes in services or charges.

You have a right to complete and current information concerning the practitioner's assessment and recommended service to be provided, including the expected duration of the service to be provided.

You may expect courteous treatment and to be free from verbal, physical, or sexual abuse by the practitioner.

Your records and transactions with the practitioner are confidential, unless release of these records is authorized in writing by the client or otherwise provided by law.

You have the right to be allowed access to records and written information from records in accordance with Minnesota Statutes section 144 291 to 144 298

You have the right to choose freely among available practitioners and to change practitioners after services have begun, within the limits of health insurance, medical assistance, or other health programs.

You have the right to coordinated transfer when there will be a change in the provider of services.

You may refuse services or treatment at any time, unless otherwise provided by law.

You may assert these client rights without retaliation.

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As a complementary and alternative health care client of Mary Langfield LLC: I acknowledge that I have received the complementary and alternative health care client bill of rights.		
Print your full name	Signature (ONLINE INITIALS)	
Today's date		
SUBMIT (EMAIL mary@marylangfield.com)		

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ACKNOWLEDGMENT AND RELEASE

My attendance at any programs or sessions with Mary Langfield Neaton is my own personal choice. I understand that Mary has recommended that I inform my medical doctor or other health care providers of any changes which I make as a result of consultations with her.

I understand that Mary is not a licensed doctor, nutritionist, or dietician. I acknowledge having received a copy of the "Complementary and Alternative Health Care Client Bill of Rights" which includes a description of Mary's training and qualifications.

As part of this health consultation program, Mary may recommend natural, non-prescription, over-the-counter dietary supplements or homeopathic remedies. I understand that these are only recommendations, and it is ultimately my decision whether to take any treatment. I understand that I would have the opportunity to seek out an opinion from my doctor or other health care providers before I started taking any dietary supplements, or homeopathic remedies.

I take full responsibility for the decisions I make concerning my health, including decisions based on what I learn during my consultations with Mary. As such, I release Mary Langfield, LLC, its members, agents, officers, and assigns, including Mary Langfield Neaton, from any claims, demands, or causes of action arising out of the services provided by Mary or decisions I make based upon what I learn from her classes or programs.

Print your full name	Signature (ONLINE INITIALS)
Today's date	
Please also view the Client Bill of Rights SUBMIT (EMAIL mary@marylangfield.com)	