

Recommendation for Examination by a Physician

I, Eugene Spence, Lic. Ac. Dipl. Ac., recommend that you _____,

receive an examination by a licensed doctor in regard to the condition for which you are seeking to be treated by acupuncture.

PATIENT

DATE

SIGNATURE OF PARENT OR GUARDIAN IF UNDER 18 YRS

DATE

Virginia law requires that you sign this form unless you can provide evidence that you have received a diagnostic examination in the last 6 months from a licensed practitioner of medicine, osteopathy, chiropractic or podiatry for the condition for which you will be treated.
(Code of Virginia 54 1-2956, 18VAC 85-110-10)