

# **Hypnosis Disclosure Form**

## Waiver of Liability

I, (the Client), agree to release Dr. Denise Koh (the Hypnosis Practitioner), of any responsibility or injury occurring from my hypnosis or therapy session(s).

## Disclaimer

I affirm that hypnosis is appropriate for me and does not conflict with existing medical or psychiatric treatment. I also affirm that, while Dr. Koh is a Medical Doctor, she will not be taking over nor replacing my general medical care which will continue with my primary care provider(s). Always seek out and follow the advice of your personal physician or other professional medical practitioner before considering alternative treatment.

## Warranty

No warranty is given, expressed or implied, for satisfactory results from any hypnosis session(s) with Dr. Koh.

## Virtual Care

I consent to Dr. Koh's communications and care using virtual and other telecommunications tools. As per the signed Consent to Use Electronic Communications form, I have been explained the risks related to unauthorized disclosure or interception of personal health information and steps I can take to help protect my information. We have discussed that care provided through video or audio communication cannot replace the need for physical examination or an in person visit for some disorders or urgent problems. I understand the need to seek urgent care in an Emergency Department as necessary.

#### **Tape/Video Recording**

I agree that portions of the hypnotherapy sessions may be recorded, and I will be informed of this prior to the session. I agree that no compensation will be paid for any products or revenues or any other value derived from these recordings or any resulting products. I waive all rights from the use of such recordings. I do not ask for, nor expect any compensation from any of the recordings taken during the hypnosis session.

I agree that I will not record any aspect of my sessions/interactions with Dr. Koh nor share any recordings/allow any others to listen in without Dr. Koh's prior written consent.

#### **Group Sessions**

In group therapy sessions, I understand the limitations of Dr. Koh's ability to ensure others will maintain confidentiality, and I will take any necessary precautions for my comfort. I agree that I will not share attendance/group member identities, any other group member's personal information or any items of a personal nature discussed in the sessions with others outside the group.

#### **Methods Used**

The Hypnosis Practitioner employs hypnosis techniques which are designed to facilitate the client's quest for selfimprovement and relaxation. Specific additional techniques may include: Body Relaxation, Directed Meditation, Age Regression, and Guided Imagery.

Initials



## **Training and Certification**

Hypnosis Session provided by: Dr. Denise Koh (*BSc, MD, CCFP, MPH, FRCPC, ACBOM*). Trained and certified in hypnosis and hypnotherapy by the KEW Training Academy and the Scottish Centre for NLP. Trained in The Silva Ultramind System, The Art of Manifesting, MindValley. In addition to her medical, public health, family medicine, and occupational medicine training, Dr. Koh has also had training in the following Physician Leadership Institute/Canadian Medical Association courses:

- Cognitive Behavioral Therapy with Mindfulness (CBTm) Classes New Facilitator Training
- Coaching for Excellence (in-house)
- Leading with Emotional Intelligence
- Leading in Crisis
- Advocacy for Change
- Supports for New and Established Leaders
- Leadership Strategies for Sustainable Physician Engagement
- Creating Healthy Work Culture Through Trauma-Informed Leadership
- Physician Leadership Focus (in house)
- Communicating for Success
- Leadership for Medical Women (in house)
- The Difference Between Moral Injury and PTSD
- Unravelling Colonization and Racism in Manitoba's Health Care System

I have read the above and have had the opportunity to review any questions/concerns with Dr. Koh.

(Signature of client)

(Printed name of client)

(Date)