**Complementary & Alternative Health Care Client Bill of Rights**

Massage and bodywork techniques are intentional and systematic ways to manipulate the soft tissues of the body to enhance health, healing, and wellbeing. Massage and Bodywork Practitioners may not provide any medical diagnoses, nor may they recommend the discontinuance of any medically prescribed treatments. If a client desires a diagnosis or services from a qualified Physician, Nurse, Chiropractor, Physical Therapist, Athletic Trainer, Dietician, Nutritionist, Osteopath, Acupuncturist, or any other type of specialized health care provider, then the client may seek such services at any time.

All clients have the right to a reasonable notice of any changes in services or fees.

All clients have the right to current and complete information concerning their Practitioner’s assessment and recommended service, including the expected duration of the service to be provided.

All clients may expect respectful treatment, and be free from any verbal, physical, or sexual abuse by their Practitioner.

All clients’ records and transactions are kept confidential unless release of these records are authorized in writing by the client, or otherwise provided by law. Clients have the right to access the written information in their personal records from services rendered.

All clients have the right to choose freely among available Practitioners, and to change Practitioners after services have begun.

All clients have the right to refuse any part of the treatment or session. The Massage and Bodywork Practitioner also retains the right to discontinue services to anyone at any time.

To file a complaint against any Massage Therapist, clients may contact the South Dakota Massage Therapy Board at massagetherapy@state.sd.us or 605-773-3440.

**Massage Therapy and Bodywork is NOT a licensed practice in all of the United States of America. This means that not all States regulate the amount of education needed for someone to practice massage. BE SAFE and make sure to verify the educational background of any Massage Therapist and Bodywork Practitioner whom you request services from.**

I, the undersigned, hereby acknowledge receipt of the Complementary & Alternative Health Care Client Bill of Rights.

Client Signature Practitioner Initials Date