

Massage with Maria  
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## **Complementary & Alternative Health Care Client Bill of Rights**

As of July 1, 2001, Minnesota's Freedom of Access to Complementary Care Law (Statute Chapter 146A) requires that you receive and acknowledge that you have received by your signature on the back of this page, the following information prior to your treatment.

**Maria Antonescu, NCTMB, hereafter, "the Practitioner" has the received following education, training & credentials:**

MSTR – McLoughlin Scar Tissue Release Technique  
Advanced & Holistic Treatment of the Postpartum Body with Lynn Schulte  
H.A.R.T. Method, Holistic Abdominal Relief Therapy, Practitioner level I, II, and  
Pregnancy. 2018  
Full Spectrum Pregnancy loss 10 week online course through Indie Birth 2018  
Holding Space for Pregnancy Loss with Amy Wright-Glenn. Certificate of completion '18  
Nutritious Movement Certified Restorative Exercise Specialist 2017  
Licensed massage therapist in the city of Duluth since 2015  
NCTMB – Nationally certified 2004 – 2016 (I chose to let this lapse)  
AAS – Associates in Applied Science degree: Anoka Tech MN, 2003  
Therapeutic Body Wellness Massage Therapist: 626 hours MSMB, Mpls, MN, 2000  
MSMB – Minneapolis School of Massage & Bodywork Inc.

**"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 INFORMATION 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, or acupuncture practitioner, or services from a 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."**  
**Complaints:** If the Client has a complaint or concern about the care or services they have received, the Client may also contact the Office of Unlicensed Complementary and Alternative Health Care Practice located in Minnesota Department of Health:

- **Mailing address:** P.O. Box 64882, St. Paul, MN 55164-0882  
**Phone:** 651-201-3721      **TTY:** 651-201-5797      **Fax:** 651-201-3839  
**Website:** <http://www.health.state.mn.us/divs/hpsc/hop/ocap/index.html>  
**Insurance:** Hands On Trade Association
- **Fees, Payment, Insurance:**  
Initial session 90 minutes \$110. Follow-up session 60 minutes \$80.

**Cash, checks and Venmo are accepted.** This Practitioner is not on contract with any HMO's, PPO's, or any other Insurance Company to provide discounted services. Payment in full for services is expected at the time of service, unless otherwise arranged prior to the appointment.

- **24 hour notice of cancellation is appreciated**
- **Change of Price:** Clients have the right to reasonable notice of changes to the prices, services, or policies.
- **Theory of Treatment:** The previously mentioned techniques are utilized to work with the whole person, body-mind-soul. Some from our culture, and some from others; utilized to facilitate your body's own innate wisdom for healing and vibrant health.
- **Right to Current Information:** Clients have the right to complete and current information concerning the practitioner's assessment and recommended service that is to be provided, including the expected duration of the service to be provided.
- **Right to Confidentiality:** Client records are confidential and will not be released, unless authorized by the client in writing or as otherwise provided for by law.
- **Right to Self Access:** Clients have the right to access to their own records maintained by the Practitioner's office, in accordance with state statute sections [144.291](#) to 144.298;
- **Personal Interaction:** Clients have the right to expect courteous treatment, free from verbal, physical, or sexual abuse.
- **Other Treatment Available:** Other massage therapy services are available to the Client in this same community. These can be located by asking the Practitioner, the provider who referred you to this practitioner or the following practitioner database: [www.amtamassage.org](http://www.amtamassage.org)
- **Right of Agency:** The Client has 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
- **Records Transfer:** The Client have the right to coordinated transfer of your records when there will be a change in the provider of services
- **Right of Refusal:** The Client may refuse services or treatment, unless otherwise provided by law.
- **Right of Non-retribution:** The Client has the right to assert the any and all of above mentioned rights without retaliation from the Practitioner.

I (please print your name) \_\_\_\_\_ acknowledge by my signature that I have received and understand the Complementary and Alternative Health Care Client Bill of Rights.

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