



Ethics Manual for MIM Graduates

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Four Hypothetical Situations for Class Discussion

Hypothetical One

Your client tells you that she is very unhappy with the treatment she has been receiving. She has been doing everything you recommended, and her condition has not improved after five sessions. The client wants a refund for payments already made *and* an apology. You are puzzled by the lack of response the therapies that you have provided and her dissatisfaction.

What are the ethical issues presented and what are your possible responses?

1. This is a good example of why you must discuss with clients in advance the limitations or potential problems associated with specific procedures before using them (*Principle 2.C*). This could include the inefficacy of the treatment or the potential for gains made right after the session to change or disappear.
2. While it is appropriate to convey confidence in the healing methods you are using, care must be taken to not overstate the power or potential inability of these methods to solve the client's problems. This is also part of clearly and accurately informing prospective clients of the nature and logistics of the potential services prior to the commencement of those services, and appropriately document having done so. (*Principle 2.B "Clearly and accurately inform prospective clients of the nature and logistics of the potential services prior to the commencement of those services"*). This is most appropriately done through a written consent form that clearly provides the limitations on treatment.
3. During and after each session, you should be evaluating your client's response to the healing sessions and the work being done at home. This is part of building a collaborative relationship with the client (see *Principle 4.C "Build a collaborative relationship with those served."*)
4. You should terminate a client relationship when it becomes clear that the client no longer needs or is no longer benefiting from the continued service. This is part of honoring the client's values and honoring the sacred space that is essential to the therapeutic process. (*Principle 1.B "Remain vigilant towards honoring sacred space and maintaining the awareness of witnessing the client in a spirit-to-spirit context"*).
5. Although the client has every right to discontinue services at any point, if you have indeed followed protocol and provided informed consent (and assuming your

consent form clearly states that you do not guarantee an outcome), you are not legally or ethically required to provide a refund, assuming the services were paid on a per-session basis. The contract is payment for time providing professional services. Outcome is not guaranteed. Nonetheless, your own sense of integrity may lead you to conclude that there was miscommunication between you and the client (*Principle 1.C “Practice the qualities of integrity, honesty and dignity.”*). Hence, there may be an opportunity to understand the how the miscommunication took place, apologize for this failure in communication, and honor the client’s request for a refund. (*Principle 4.D. “Treat clients with respect, compassion, kindness and non-judgment to maintain a harmonious, professional healing relationship.”*)

6. Other alternatives for resolving this include:

a. You could offer a free session in which you bring in an advanced energy healing practitioner as a consultant. Though this would require an investment on your part, the fact that you do not know what is interfering with the client’s progress might make it a very good investment, both for your own professional education (and reputation) and for the client’s welfare, as well as an investment in possibly getting over a hurdle and being able to continue to work productively with the client. (*Principle 8.A. “Strive for professional excellence through ongoing assessment of personal strengths, limitations, and effectiveness.”*)

b. You could articulate your puzzlement at the failure to see progress and make a referral to someone who you feel might be able to resolve the mystery. You could refund all or a portion of your fee.

c. You could offer a free session in which you bring in an advanced energy healing practitioner as a consultant. Though this may require that you pay for the session, the fact that you do not know what is interfering with the client’s progress might make it a very good investment, both for your own professional education (and reputation) and for the client’s welfare, as well as an investment in possibly getting over a hurdle and being able to continue to work productively with the client. (*Principle 8.B. “B. Keep current in the field and continually seek to expand effectiveness as a practitioner.”*)

Hypothetical Two

Through a process of several sessions you become aware/suspect that your client has a growth that you believe may be malignant, and it is unrelated to the treatment for which she is seeking assistance. You feel the situation is urgent and repeatedly suggest the client have the condition evaluated by a medical professional. Yet despite your repeated suggestions, the client refuses to get a medical diagnosis for the growth. You know your client’s doctor’s name and your client’s spouse.

What are your responsibilities?

1. You must respect the client's free will and remain neutral with respect to their own decisions regarding the management of the body and spirit. (*Principle 1.E. "Respect client boundaries, maintain strict client-practitioner neutrality, and limit work to agreed-upon times and places."*) You have to recognize the pitfalls of being overly attached to the outcomes of the services you provide. And maintain your own neutrality with respect to client. By your insistence that the client see a doctor you have now lost some of your neutrality and therefore your objectivity with respect to evaluation of your client. This could interfere with your ability to give continued treatment for whatever other disorders the client has come seeking assistance.
2. Since you cannot diagnose or treat the client's condition, you must honor the client's right to refuse medical treatment (*Principle 5.D. "Do not diagnose, prescribe, or treat medical disorders unless simultaneously credentialed to do so and to make referrals to other health care professionals when and as appropriate"*).
3. You can encourage, but you cannot pressure or coerce a client into any action or belief, even if you consider that such act or belief would serve the best interests of the client. You must honor and respect their values. (*Principle 4.A. "Respect the inherent worth, dignity, and uniqueness of all people, and the rights of individuals to privacy, confidentiality, and self-determination."*) This is especially true in cross-cultural contexts where approaches to disease or disease treatment may differ from your own. The task is to recognize and respect the client's values as they related to their way of embodiment.
4. Because energy healing can open issues that are delicate, you should be prepared to articulate these issues when they emerge and discuss them in a professional, and respectful manner, while at the same time monitoring the client's ability to discuss the issue. (*Principle 1A "Seek to promote accuracy, honesty, truthfulness, and dignity in the practice, teaching, science, and art of energy healing."*)
5. Your client is the only person who has the right to determine who has access to information about the services he or she has received from you. (*Principle 3.A "Honor client privacy and hold session information strictly confidential unless I receive written prior client consent, the safety of others is at stake, or I am required to divulge information by law"*). You can break confidentiality only when there is client consent or "the safety of others is at stake," but, while you may suspect the worst, this situation does not meet that criterion. So contacting the client's physician or spouse without the client's permission would violate confidentiality.

6. If you have been adamant about your recommendation for a medical diagnosis, and you feel that it is interfering with your ability to provide treatment, then you must honor your own ability to honor sacred space with the client (*Principle 1.B “Remain vigilant towards honoring sacred space and maintaining the awareness of witnessing the client in a spirit-to-spirit context...”*). Your largest leverage would be to make it a condition for continuing to work together that the client obtain a medical diagnosis. Though this borders on being coercive rather than honoring the client’s choice, you may find that it is the only route you can take in good conscience.

Hypothetical Three

A client who happens to be a landscaper calls for an initial appointment. He has been without work for the past three months due to an injury that is to be a focus of your work together. Once you tell him your fee, he says that he simply does not have the money but he really wants to work with you. He asks if he can do a work exchange of landscaping in repayment for sessions. You have just moved to a new home that needs landscaping, but you are unsure how much work needs to be done on your new home.

What are your responsibilities and what do you say to the client?

1. In evaluating the value of the exchange your focus must be on the client’s best interests. (*See Principle 5.A. “Hold the client’s health and welfare to be the highest priority.”*)
2. You may choose to barter for services only if this arrangement will not interfere with the quality of the services being provided and if the resulting arrangement is not exploitative to either party. (*Principle 4.E “... avoid unrealistic or unclear commitments”*). If limitations to services can be anticipated because of financial hardship, the related issues are discussed with the recipient of services as early as is feasible.
3. It is your responsibility to ensure that each party is aware of issues related to shifting from the client-practitioner setting. These issues should be discussed with the client and take precedence in decisions about the dual relationship. (*Principle 7.E. “Stay alert to factors that might impact the healing relationship”*). Be aware that as an energetic healer there is likely a power differential that requires special consideration in establishing the fairness of the exchange of service.” (*Principle 7.C “Maintain awareness of the power differences inherent in the professional relationship and not exploit them.”*)
4. You ensure that prospective clients understand and agree to the specifics in their consent before commencing energy healing services. (*Principle 2.B. “Clearly and accurately inform prospective clients of the nature and logistics of the potential services.”*)

5. Although bartering is not considered unethical, certain criteria must be met, with the fundamental concern being whether the arrangement might compromise the healing services the person receives. So you must ask yourself if it is truly possible for both you and the client to “bracket” the two relationships. What if one of your recommendations in your healing role has to be that he refrain from the kinds of physical activities needed in the barter? (*Principle 7.B “Avoid dual relationships that might negatively impact the effectiveness of the services provided.”*) Does the barter impact your attitude in the sessions if you are unhappy with his work in your garden? How might it impact his work in your garden if he is unhappy with your sessions? (*Principle 7.A “Clarify professional roles and obligations with clients...”*). What if he reinjures himself while working in your garden because the arrangement caused him to commence working before he was physically ready to do so? Various subtle manipulations are invited when such a dual relationship is established.

6. Other solutions include:

a. Work with him first and have him provide his landscaping services after his sessions with you have been completed. Like any delayed payment arrangement, however, this puts you at risk of not being paid after a sizable debt has accumulated. It also makes it more likely for your payment to be dependent on his satisfaction with your services, an additional dynamic affecting your work with him that does not serve him or you. And it assumes his injuries are not permanent and that he will be able to resume work as a landscaper. But making the dual relationship sequential instead of simultaneous does remove many of the other potentially problematic factors inherent in dual relationships.

b. Have him find a paying client who needs the kinds of services he is offering to you so there is a clean monetary exchange on both sides. If this is not possible or he declines to consider it, and your determination is that the dual relationship would compromise your services to him, you are obligated to refuse to enter into the barter

Hypothetical Four

Your client comes in for work with relatively mild anxiety issues related to her work situation. During your work with her she becomes interested in past-life regressions and other treatment modalities. During one session you notice she enters a deep trance. When she returns she expresses confusion as to what she experiences and wonders whether what she experienced was from a traumatic event that occurred in an earlier part of this lifetime or a past lifetime.

What are reactions and responsibilities toward the client?

Possible answers are:

1. You should be vigilant about the client's expression of disorientation (Principle 1.B *"Remain vigilant towards honoring sacred space and maintaining the awareness of witnessing the client in a spirit-to-spirit context..."*).
2. You should be asking questions to explore the client's belief systems and values with respect to the experience. (2A: A. *Recognize and honor the values and individuality of the client and the client's experiences and perspectives*). When asked you can provide possible explanations for the experience, as long as these explanations remain open to integration with the client's ability to evaluate the experience.
3. You should allow the client to explore the possible ramifications, significance of what was experienced. By defining it as a past life experience, or an actual traumatic event, that limits the possibilities for the client to evaluate what was experienced (Principle 4C: *Build a collaborative relationship with those served*).
4. Understand that there are many forms of consciousness. This may be the client's experience or the client's sensitivities to others in their surroundings or family. In honoring the client you may want to ask questions about what this means to them, where they think the source of this experience may arise (Principle 4D: *Treat clients with respect, compassion, kindness and non-judgment to maintain a harmonious, professional healing relationship.*)

Signpost for non-ordinary states of consciousness include:

- a. Dissociation from the present time or time distortion
- b. Re-experiencing biographical material in a vivid or third-person perspective
- c. Out-of-body experiences
- d. Spiritual visions, interactions with power animals ("amakua")
- e. Intense release of body energy in spasms ("Kriyas")
- f. Recalling dramas that occurred in human history or a collective unconscious
- g. Remembering a past life
- h. Connecting with spirit guides, deceased relatives or angels

5. Our awareness of the client's needs may require a respectful silence, just a witnessing of the incredible insight the client has gained can provide the support that the client needs. (Principle 1E: *Respect client boundaries, maintain strict client-practitioner neutrality, and limit work to agreed-upon times and places*). One method of honoring the client boundaries is to create a neutral space to explore what the client experienced. What is experienced as a negative or fearful experience may be a valuable spiritual or personal insight into a form of consciousness the client was not previously aware of. (Principle 5E: *Understand therapeutic intent and conduct sessions with the sole objective of benefitting the client.*)

6. Allow the client time to process the experience and create some closure for the client. Many experiences are processed on a conscious and unconscious level at the same time and the timing of these processes may not coincide. Non-ordinary states of consciousness may require other energy modalities to allow the experience to settle in.

Other considerations include:

- a. Making yourself available for follow up before the next scheduled session
- b. Providing some closure for the client to allow safe travel and return to ordinary state of consciousness
- c. Ensuring the client feels safe and supported.

7. Evaluate your ability to help the client. If the image is a traumatic one, there may be other therapeutic techniques to address issues of past abuse or neglect. (Principle 6B: *Perform only those services qualified to perform, represent education, certifications, professional affiliations, or other qualifications accurately*).



Code of Ethics for Intuition Medicine® Energy Practitioners

As an Intuition Medicine® practitioner I agree to hold as the highest priority in my professional activities the health and welfare of clients, students, and others with whom I become professionally engaged. All other statements in this document are elaborations upon this foundational principle.

I agree to the following principles in my practice of Intuition Medicine®:

- 1. Recognize the Nature of the Healing Relationship and Honor Professional and Personal Boundaries**
 - A. Seek to promote accuracy, honesty, truthfulness, and dignity in the practice, teaching, science, and art of energy healing.
 - B. Remain vigilant towards honoring sacred space and maintaining the awareness of witnessing the client in a spirit-to-spirit context, and being sure that the highest spiritual integrity is held for the client's greatest good
 - C. Practice the qualities of integrity, honesty and dignity.
 - D. Stay sensitive to the potential impact of having a special facility with subtle energies and use this facility only in a manner that is beneficial to the client and others.
 - E. Respect client boundaries, maintain strict client-practitioner neutrality, and limit work to agreed-upon times and places.

- 2. Maintain the Integrity of the Client and Provide Informed Consent**
 - A. Recognize and honor the values and individuality of the client and the client's experiences and perspectives.

- B. Clearly and accurately inform prospective clients of the nature and logistics of the potential services prior to the commencement of those services, and appropriately document having done so.
- C. Discuss with clients in advance the limitations or potential problems associated with specific procedures before using them.

3. Maintain Client Confidentiality

- A. Honor client privacy and hold session information strictly confidential unless I receive written prior client consent, the safety of others is at stake, or I am required to divulge information by law.
- B. Uphold the confidentiality client, informing clients in advance of exceptions, such as legal proceedings that require disclosure and the obligation to disclose information that might prevent clear and imminent danger to the client or to others.

4. Demonstrate Respect for the Client and Other Professionals

- A. Respect the inherent worth, dignity, and uniqueness of all people, and the rights of individuals to privacy, confidentiality, and self-determination.
- B. Treat clients, students, and colleagues with respect and courtesy, communicating clearly and sensitively regarding issues that affect the services they provide.
- C. Build a collaborative relationship with those served.
- D. Treat clients with respect, compassion, kindness and non-judgment to maintain a harmonious, professional healing relationship.
- E. Keep agreements and avoid unrealistic or unclear commitments.
- F. Resist gossip, but rather speak directly with other energy healing practitioners when concerns about their actions arise, making every effort to resolve differences or ethical issues in a frank, respectful, and wholesome manner.

5. Commit to Do No Harm

- A. Hold the client's health and welfare to be the highest priority.
- B. Understand therapeutic intent and conduct sessions with the sole objective of benefitting the client.

- C. Refer that client to a physician or other qualified health-care professional where there is an indication of an undiagnosed condition for which Intuition Medicine® may be inappropriate.
- D. Do not diagnose, prescribe, or treat medical disorders unless simultaneously credentialed to do so, and to make referrals to other health care professionals when and as appropriate.

6. Non-Interference with Other Medical Providers

- A. Never suggest that a client change or end dosages of substances prescribed by other licensed health care providers or interfere with the treatment of a licensed health care provider.
- B. Perform only those services qualified to perform, represent education, certifications, professional affiliations, or other qualifications accurately.
- C. Respect the professional status of other health care practitioners.

7. Avoid Conflicts of Interest

- A. Clarify professional roles and obligations with clients and colleagues and manage conflicts of interest in a manner that avoids exploitation or harm.
- B. Avoid dual relationships that might negatively impact the effectiveness of the services provided.
- C. Maintain awareness of the power differences inherent in the professional relationship and not exploit them.
- D. Never enter into a sexual relationship with a client.
- E. Stay alert to factors that might impact the healing relationship, such as a client becoming overly dependent or being unable to pay for continued services, and to generate, with the client, appropriate strategies for addressing such issues.

8. Continue Professional Development and the Education of the Intuition Medicine® Community

- A. Strive for professional excellence through ongoing assessment of personal strengths, limitations, and effectiveness.

- B. Keep current in the field and continually seek to expand effectiveness as a practitioner.
- C. Actively support one's own health and resilience to be at best as a practitioner and a model of what is taught.
- D. When offering educational programs or presentations, ensure that the goals of the program are properly described, are appropriate for the intended audience, and that the program is run in a manner that accomplishes its stated goals.
- E. When offering educational programs or presentations create a safe and supportive learning environment, prioritizing the welfare of students who participate in training exercises or who volunteer for demonstrations.
- F. When offering educational programs or presentations take steps to ensure that graduates of the Intuition Medicine® program represent the training they have received appropriately and with an understanding of the limitations, as well as the potential of the skills they have developed.
- G. Respect copyright and trademarked information and use such product with prior consent from the author.

AIM Graduate Year or Class # _____

Signature:

Date:



Academy of Intuition Medicine® Registration

The US Department of Commerce, Patent and Trademark Office has granted Francesca McCartney PhD the exclusive use of the name **Intuition Medicine®**. This means that there is no other entity, institution or group that has used, or can legally use this name.

Every time you use the term Intuition Medicine® in promotional material, writings, business cards, etc. please include the Registration Mark symbol – the letter “R” in a circle ®.

Most computer programs have a shortcut for the registration mark symbol. In Microsoft Word it is this sequence: Left “(“ parenthesis; capital “R”; right “)” parenthesis; then the ® appears.

You may be interested to know that registration and trademarks and grew out of guilds who affixed their guild mark to the goods that they sold. The mark was meant to identify the goods as a product of a particular craftsman or group of craftsmen. The mark was meant to indicate the origin of the goods. (*Thanks to Cheryl Stage, Esq. for that piece of history.*) This registration mark gives your MIM another value of a diploma earned in a specific and recognized school.

Also please use the entire name, Academy of Intuition Medicine®. As we grow globally, it is important to use this mark and our complete name in order to maintain the integrity of our work. In addition it is important to identify Intuition Medicine® as a specific modality of energy medicine, as well as, for recognition of our academic school as unique as an energy medicine organization. Please use this registration mark on all your business cards, promotional pieces and any papers or articles that you write. It is a hallmark of professional distinction.



Practitioner Insurance Information

This page contains insurance information for Academy practitioners. This is a must for legal protection as a professional Intuition Medicine® practitioner.

Associated Bodywork & Massage Professionals (ABMP)

ABMP is a membership organization serving the massage, bodywork, somatic and esthetic professions. The Academy of Intuition Medicine is pleased to be an approved provider of continuing education courses for ABMP.

www.abmp.com

Click here: [Student Liability Insurance/Student Membership](#) to apply for insurance. Use the Academy provider number when applying: provider number 507723. www.abmp.com/students

Since 2003 the Academy has had a professional liability coverage relationship with ABMP. Please refer to the [Continuing Education Units and Certifications page](#) on the Academy of Intuition Medicine® web site for additional information. <https://intuitionmedicine.org/continuing-education-credits/>

Hands-On Trade Association (HOTA)

HOTA also offers [Professional & General Liability Insurance coverage](#) and business benefits for Independent Contractors of Massage Therapy, Cosmetology, Esthetics, Yoga and more.

<https://www.handsontrade.com>



Alternative Care (and Related Provisions)

California Business and Professions Code:

§ 2051 The physician's and surgeon's certificate authorizes the holder to use drugs or devices in or upon human beings and to sever or penetrate the tissues of human beings and to use any and all other methods in the treatment of diseases, injuries, deformities, and other physical and mental conditions.

§ 2052 Practice, attempt, or advertising without certificate; punishment; conspiracy or aiding and abetting; punishment

(a) Notwithstanding Section 146, any person who practices or attempts to practice, or who advertises or holds himself or herself out as practicing, any system or mode of treating the sick or afflicted in this state, or who diagnoses, treats, operates for, or prescribes for any ailment, blemish, deformity, disease, disfigurement, disorder, injury, or other physical or mental condition of any person, without having at the time of so doing a valid, unrevoked, or unsuspended certificate as provided in this chapter or without being authorized to perform the act pursuant to a certificate obtained in accordance with some other provision of law is guilty of a public offense, punishable by a fine not exceeding ten thousand dollars (\$10,000), by imprisonment pursuant to subdivision (h) of Section 1170 of the Penal Code, by imprisonment in a county jail not exceeding one year, or by both the fine and either imprisonment.

(b) Any person who conspires with or aids or abets another to commit any act described in subdivision (a) is guilty of a public offense, subject to the punishment described in that subdivision.

(c) The remedy provided in this section shall not preclude any other remedy provided by law.

§ 2053.5 Actions that constitute unlawful practice of medicine

(a) Notwithstanding any other provision of law, a person who complies with the requirements of Section 2053.6 shall not be in violation of Section 2051 or 2052 unless that person does any of the following:

- (1) Conducts surgery or any other procedure on another person that punctures the skin or harmfully invades the body.
 - (2) Administers or prescribes X-ray radiation to another person.
 - (3) Prescribes or administers legend drugs or controlled substances to another person.
 - (4) Recommends the discontinuance of legend drugs or controlled substances prescribed by an appropriately licensed practitioner.
 - (5) Willfully diagnoses and treats a physical or mental condition of any person under circumstances or conditions that cause or create a risk of great bodily harm, serious physical or mental illness, or death.
 - (6) Sets fractures.
 - (7) Treats lacerations or abrasions through electrotherapy.
 - (8) Holds out, states, indicates, advertises, or implies to a client or prospective client that he or she is a physician, a surgeon, or a physician and surgeon.
- (b) A person who advertises any services that are not unlawful under Section 2051 or 2052 pursuant to subdivision (a) shall disclose in the advertisement that he or she is not licensed by the state as a healing arts practitioner.

§ 2053.6 Required disclosures by persons providing alternative healing arts services

- (a) A person who provides services pursuant to Section 2053.5 that are not unlawful under Section 2051 or 2052 shall, prior to providing those services, do the following:
- (1) Disclose to the client in a written statement using plain language the following information:
 - (A) That he or she is not a licensed physician.
 - (B) That the treatment is alternative or complementary to healing arts services licensed by the state.
 - (C) That the services to be provided are not licensed by the state.
 - (D) The nature of the services to be provided.
 - (E) The theory of treatment upon which the services are based.
 - (F) His or her educational, training, experience, and other qualifications regarding the services to be provided.
 - (2) Obtain a written acknowledgment from the client stating that he or she has been provided with the information described in paragraph (1). The client shall be provided with a copy of the written acknowledgement, which shall be maintained by the person providing the service for three years.

(b) The information required by subdivision (a) shall be provided in a language that the client understands.

(c) Nothing in this section or in Section 2053.5 shall be construed to do the following:

(1) Affect the scope of practice of licensed physicians and surgeons.

(2) Limit the right of any person to seek relief for negligence or any other civil remedy against a person providing services subject to the requirements of this section.

§ 2054 Use of term or letters falsely indicating right to practice; penalty; permitted phrases for specified practitioners

(a) Any person who uses in any sign, business card, or letterhead, or, in an advertisement, the words “doctor” or “physician,” the letters or prefix “Dr.,” the initials “M.D.,” or any other terms or letters indicating or implying that he or she is a physician and surgeon, physician, surgeon, or practitioner under the terms of this or any other law, or that he or she is entitled to practice hereunder, or who represents or holds himself or herself out as a physician and surgeon, physician, surgeon, or practitioner under the terms of this or any other law, without having at the time of so doing a valid, unrevoked, and unsuspended certificate as a physician and surgeon under this chapter, is guilty of a misdemeanor.

(b) A holder of a valid, unrevoked, and unsuspended certificate to practice podiatric medicine may use the phrases “doctor of podiatric medicine,” “doctor of podiatry,” and “podiatric doctor,” or the initials “D.P.M.,” and shall not be in violation of subdivision (a).

(c) Notwithstanding subdivision (a), any of the following persons may use the words “doctor” or “physician,” the letters or prefix “Dr.,” or the initials “M.D.”:

(1) A graduate of a medical school approved or recognized by the board while enrolled in a postgraduate training program approved by the board.

(2) A graduate of a medical school who does not have a certificate as a physician and surgeon under this chapter if he or she meets all of the following requirements:

(A) If issued a license to practice medicine in another jurisdiction, has not had that license revoked or suspended by any jurisdiction.

(B) Does not otherwise hold himself or herself out as a physician and surgeon entitled to practice medicine in this state except to the extent authorized by this chapter.

(C) Does not engage in any of the acts prohibited by Section 2060.

(3) A person authorized to practice medicine under Section 2111 or 2113 subject to the limitations set forth in those sections.

§ 2055 Use of initials “M.D.”

Notwithstanding any other provision of law, a person issued a physician’s and surgeon’s certificate by the Medical Board of California pursuant to the provisions of this chapter shall be entitled to use of the initials “M.D.”

§ 2056 Retaliation against physicians who advocate for medically appropriate health care for patients; prohibition; scope of protection

(a) The purpose of this section is to provide protection against retaliation for physicians who advocate for medically appropriate health care for their patients pursuant to *Wickline v. State of California* 192 Cal.App.3d 1630.

(b) It is the public policy of the State of California that a physician and surgeon be encouraged to advocate for medically appropriate health care for his or her patients. For purposes of this section, “to advocate for medically appropriate health care” means to appeal a payer’s decision to deny payment for a service pursuant to the reasonable grievance or appeal procedure established by a medical group, independent practice association, preferred provider organization, foundation, hospital medical staff and governing body, or payer, or to protest a decision, policy, or practice that the physician, consistent with that degree of learning and skill ordinarily possessed by reputable physicians practicing according to the applicable legal standard of care, reasonably believes impairs the physician's ability to provide medically appropriate health care to his or her patients.

(c) The application and rendering by any person of a decision to terminate an employment or other contractual relationship with, or otherwise penalize, a physician and surgeon principally for advocating for medically appropriate health care consistent with that degree of learning and skill ordinarily possessed by reputable physicians practicing according to the applicable legal standard of care violates the public policy of this state. No person shall terminate, retaliate against, or otherwise penalize a physician and surgeon for that advocacy, nor shall any person prohibit, restrict, or in any way discourage a physician and surgeon from communicating to a patient information in furtherance of medically appropriate health care.

(d) This section shall not be construed to prohibit a payer from making a determination not to pay for a particular medical treatment or service, or to prohibit a medical group, independent practice association, preferred provider organization, foundation, hospital medical staff, hospital governing body acting pursuant to Section 809.05, or payer from enforcing reasonable peer review or utilization review protocols or determining whether a physician has complied with those protocols.

(e) Medically appropriate health care in a hospital licensed pursuant to Section 1250 of the Health and Safety Code shall be defined by the hospital medical staff and approved by the governing body, consistent with that degree of learning and skill ordinarily possessed by reputable physicians practicing according to the applicable legal standard of care.

(f) Nothing in this section shall be construed to prohibit the governing body of a hospital from taking disciplinary actions against a physician and surgeon as authorized by Sections 809.05, 809.4, and 809.5.

(g) Nothing in this section shall be construed to prohibit the Medical Board of California from taking disciplinary actions against a physician and surgeon under Article 12 (commencing with Section 2220).

(h) For purposes of this section, “person” has the same meaning as set forth in Section 2032.

§ 2056.1 Health care service plans; doctor-patient communications; prohibited contract provisions

(a) The purpose of this section is to ensure that health care service plans and their contracting entities do not enter into contracts with physicians and surgeons or other licensed health care providers that interfere with any ethical responsibility or legal right of physicians and surgeons or other licensed health care providers to discuss with their patients information relevant to their patients' health care. It is the intent of the Legislature to guarantee that a physician and surgeon or other licensed health care provider can communicate freely with, and act as advocate for, his or her patient.

(b) Health care service plans and their contracting entities shall not include provisions in their contracts that interfere with the ability of a physician and surgeon or other licensed health care provider to communicate with a patient regarding his or her health care, including, but not limited to, communications regarding treatment options, alternative plans, or other coverage arrangements. Nothing in this section shall preclude a contract provision that provides that a physician and surgeon, or other licensed health care provider, may not solicit for alternative coverage arrangements for the primary purpose of securing financial gain.

(c) Any contractual provision inconsistent with this section shall be void and unenforceable.

(d) For purposes of this section, “licensed health care provider” means any person licensed or certified pursuant to this division or licensed pursuant to the Osteopathic Initiative Act or the Chiropractic Initiative Act.

(e) No communication regarding treatment options shall be represented or construed to expand or revise the scope of benefits or covered services under a health care service plan or insurance contract.

§ 2058 Exemptions; service in case of emergency; domestic administration of family remedies; obtaining blood for glucose testing

(a) Nothing in this chapter prohibits service in the case of emergency, or the domestic administration of family remedies.

(b) Nothing in this chapter shall be construed to prohibit obtaining a blood specimen by skin puncture for the purpose of performing blood glucose testing for the purposes of monitoring a minor child in accordance with paragraph (6) of subdivision (b) of Section 1241.

§ 2059 Repealed by Stats.1983, c. 239, § 6

§ 2060 Exemptions; out of state practitioners; consultations; professional education

Nothing in this chapter applies to any practitioner located outside this state, when in actual consultation, whether within this state or across state lines, with a licensed practitioner of this state, or when an invited guest of the California Medical Association or the California Podiatric Medical Association, or one of their component county societies, or of an approved medical or podiatric medical school or college for the sole purpose of engaging in professional education through lectures, clinics, or demonstrations, if he or she is, at the time of the consultation, lecture, or demonstration a licensed physician and surgeon or a licensed doctor of podiatric medicine in the state or country in which he or she resides. This practitioner shall not open an office, appoint a place to meet patients, receive calls from patients within the limits of this state, give orders, or have ultimate authority over the care or primary diagnosis of a patient who is located within this state.

§ 2061 Inapplicability of chapter to person licensed under other provision of law relating to healing arts

Nothing in this chapter shall be construed as limiting the practice of other persons licensed, certified, or registered under any other provision of law relating to the healing arts when such person is engaged in his or her authorized and licensed practice.

§ 2062 Exemptions; testing and guidance programs and physical fitness tests

Testing and guidance programs in schools, colleges, and universities and physical fitness tests given by public and private agencies in connection with employment or issuance or renewal of licenses or permits do not constitute the practice of medicine within the meaning or intent of this chapter.

§ 2063 Prohibition of discrimination against school or other treatment; inapplicability to treatment by prayer; noninterference with practice of religion

Nothing in this chapter shall be construed so as to discriminate against any particular school of medicine or surgery, school or college of podiatric medicine, or any other treatment, nor shall it regulate, prohibit, or apply to any kind of treatment by prayer, nor interfere in any way with the practice of religion.

§ 2064 Exemptions; treatment by students

Nothing in this chapter shall be construed to prevent a regularly matriculated student undertaking a course of professional instruction in an approved medical school, or to prevent a foreign medical student who is enrolled in an approved medical school or clinical training program in this state, or to prevent students enrolled in a program of supervised clinical training under the direction of an approved medical school pursuant to Section 2104, from engaging in the practice of medicine whenever and wherever prescribed as a part of his or her course of study.

§ 2064.1 Students of schools approved by American Osteopathic Association or Osteopathic Medical Board of California; enrollment in clerkships or preceptorships

Notwithstanding the provisions of Section 2064 or any other provisions of this chapter, a regularly matriculated student undertaking a course of professional instruction in a medical school approved by the American Osteopathic Association or the Osteopathic Medical Board of California is eligible for enrollment in elective clerkships or preceptorships in any medical school or clinical training program in this state.

§ 2064.2 Osteopathic medical school students; denying access to medical school or clinical program clerkships or preceptorships; injunction

No medical school or clinical training program shall deny access to elective clerkships or preceptorships in any medical school or clinical training program in this state solely on the basis that a student is enrolled in an osteopathic medical school.

Any violation of this section or Section 2064.1 may be enjoined in an action brought in the name of the people of the State of California by the district attorney of the county in which the violation occurs, upon receipt of a complaint by an aggrieved student.

§ 2065 Practice of medicine, receipt of compensation or offer by postgraduate trainee, intern, resident, postdoctoral fellow or instructor; prohibition; exception

Unless otherwise provided by law, no postgraduate trainee, intern, resident, postdoctoral fellow, or instructor may engage in the practice of medicine, or receive compensation therefor, or offer to engage in the practice of medicine unless he or she holds a valid, unrevoked, and unsuspended physician's and surgeon's certificate issued by the board. However, a graduate of an approved medical school, who is registered with the board and who is enrolled in a postgraduate training program approved by the board, may engage in the practice of medicine whenever and wherever required as a part of the program under the following conditions:

- (a) A graduate enrolled in an approved first-year postgraduate training program may so engage in the practice of medicine for a period not to exceed one year whenever and wherever required as a part of the training program, and may receive compensation for that practice.
- (b) A graduate who has completed the first year of postgraduate training may, in an approved residency or fellowship, engage in the practice of medicine whenever and wherever required as part of that residency or fellowship, and may receive compensation for that practice. The resident or fellow shall qualify for, take, and pass the next succeeding written examination for licensure, or shall qualify for and receive a physician's and surgeon's certificate by one of the other methods specified in this chapter. If the resident or fellow fails to receive a license to practice medicine under this chapter within one year from the commencement of the residency or fellowship or if the board denies his or her application for licensure, all privileges and exemptions under this section shall automatically cease.

§ 2066 Practice of medicine; foreign medical graduates; failure to take or pass examinations

- (a) Nothing in this chapter shall be construed to prohibit a foreign medical graduate from engaging in the practice of medicine whenever and wherever required as a part of a clinical service program under the following conditions:
 - (1) The clinical service is in a postgraduate training program approved by the Division of Licensing.

- (2) The graduate is registered with the division for the clinical service.
- (b) A graduate may engage in the practice of medicine under this section until the receipt of his or her physician and surgeon's certificate. If the graduate fails to pass the examination and receive a certificate by the completion of the graduate's third year of postgraduate training or if the division denies his or her application for licensure, all privileges and exemptions under this section shall automatically cease.
- (c) Nothing in this section shall preclude a foreign medical graduate from engaging in the practice of medicine under any other exemption contained in this chapter.

§ 2068 Nutritional advice; notice by person in commercial practice; posting

This chapter shall not be construed to prohibit any person from providing nutritional advice or giving advice concerning proper nutrition. However, this section confers no authority to practice medicine or surgery or to undertake the prevention, treatment, or cure of disease, pain, injury, deformity, or physical or mental conditions or to state that any product might cure any disease, disorder, or condition in violation of any provision of law.

For purposes of this section the terms "providing nutritional advice or giving advice concerning proper nutrition" means the giving of information as to the use and role of food and food ingredients, including dietary supplements.

Any person in commercial practice providing nutritional advice or giving advice concerning proper nutrition shall post in an easily visible and prominent place the following statement in his or her place of business:

"NOTICE"

"State law allows any person to provide nutritional advice or give advice concerning proper nutrition—which is the giving of advice as to the role of food and food ingredients, including dietary supplements. This state law does NOT confer authority to practice medicine or to undertake the diagnosis, prevention, treatment, or cure of any disease, pain, deformity, injury, or physical or mental condition and specifically does not authorize any person other than one who is a licensed health practitioner to state that any product might cure any disease, disorder, or condition."

The notice required by this section shall not be smaller than 8-1/2 inches by 11 inches and shall be legibly printed with lettering no smaller than 1/2 inch in length, except the lettering of the word "NOTICE" shall not be smaller than 1 inch in length.



Good Energetic Practitioner/Client Boundaries

By Elizabeth Krasnoff, MIM 29 5/24/16

If you are someone who works with energy, boundaries become one of the most important parts of your practice. Here is a discussion with tools and practices of boundaried energetic exchange. As a healer, your practice, in essence, is boundaried energetic exchange. Whether we think of this energy exchange as healing, supporting or guiding, being in integrity about our boundaries is critical. After two years at the Academy of Intuition Medicine® in Sausalito, CA, here is what I've learned.

Some of the key factors that create boundary challenge are the following: We cannot physically see energy. It makes it harder and more nuanced to "separate people's energy" (or not "merge") clearly, like you could with a pile of apples and bananas on a table. By nature, if you are sensitive to energy, you are sensitive to ALL energy, and it is a work in progress to determine which energy is yours and which is not. Is it you or is it the client across the room or the telephone or Skype line? Or the other healers in the room? Which energy is just present atmospherically (due to other events that have happened in your physical space previously, the season, the present astrology or the larger arc of evolutionary influences) and very importantly, which energy comes from pure and highest good sources. (There are always some bad apples floating around). And finally, which energy deserves to be commented on versus simply observing. This is a lot of very subtle manoeuvring.

Once you are sitting across from a client and finally doing what you are meant to do (a deeply fulfilling and joyful moment) it is a challenge to remember NOT to say all the things that you see. At last you are asked to do what you do best: to see! But ironically, you must next remember to apply the ultimate discernment in saying very little. Only speak out loud what the other spirit and body is ready to know. We train ourselves to remember that spirit moves at a different pace than the body. Even if the spirit across from you may want to know everything, is their body ready for it? There can be a conflict of readiness that we must stay attuned to.

Another issue that can arise is a spirit of competition. Healers by nature have an instant response to an energetic imbalance, almost Pavlovian: "I must balance this issue immediately!", the inner voice says. However when working in a panel setting with other healers (a panel is a group of healers working together to focus the power

of their group energy on one individual), our natural competitiveness can appear. Before you know it, you are trying to get a word in edgewise or be the MVP on the healing panel.

Another issue that can arise is trying for speed: who can say it first? Best? This journey for approval takes you back into ego and out of the intuitive state. There is an endless line of egoic challenges tempting you to return to your well-worn pathways of judgment (of self and others) and duality (an either/or approach to a problem).

How do we avoid all these pitfalls? It is crucial to stay in an “intuitive state of mind” to be ready for these challenges, the main ones being: “crossing the river into another’s energetic space”, as we call it; being in our analytical space instead of our intuitive space; or egoic motivations such as competitive/speed healing or self-importance/self-approval issues. At the Academy, to this end we spend an entire module learning how to properly set up the energy and condition the space for the highest healing good to happen in the appropriate boundaries. This Panel Protocol™ is what establishes the high level of integrity that separates out a positive, bounded energetic exchange from inappropriate and damaging information such as that as we may receive from well intentioned but misplaced healers, psychics or other readers. So as we are taught, before a session begins, protocol must be established. In addition to this very sophisticated training on set up of the individual healer, their chakras, and the actual physical space, perhaps the most important part of protocol is asking for and receiving permission to do the work. Then, the challenge begins to release yourself into the intuitive information field and stay focused on the stated goal at the same time.

For starters, what helps me to keep focused is to remember that the most important thing is the client and their state of being. The very first golden question is always: “What would you like to achieve with this session?”, or “Is there anything you would like to work on today?” I come back to that focus with each breath. On the inhale I sense the client. On the exhale I release any ego from me or anything the client is ready to let go of. Here are some other practices that I have developed to make sure that I stay centered when my human persona or “ego” tempts me away from my centered intuitive space. When I am working with a client, before I give information, I ask three times whether their spirit/body is ready for the information and check their Information Gauges™. I keep two gauges up visually for me to check in on during a session. One gauge reads the body, one gauge reads the spirit. They work like reading the gauge on a gas tank, but they start at empty and fill up as we work: and I always stop at 70% full. At this point, I strengthen and widen the clients grounding in case something releases and they are ready for more information. If that does not create more space in the gauge, I wind the session down pretty quickly.

When I do say what I have seen to the client, I check in with the client. I ask questions like:

- Does that resonate for you?
- How are you feeling?
- What are your thoughts or images?
- Is there anything you want to add?
- Are you complete?
- Are you ready to move on?

With this respectful communication I allow the client's body to pace the session, even above the client's own spirit, which may move faster than the client's body. After boundaries are in place, grounding for the client is the next most important thing to establish. Think of travelling to another planet: first you need to land and anchor, and then you need to set up communication channels. In any case, it is very important for the client to feel grounded and safe. For all of us, when we are not feeling safe and grounded, we cannot process, absorb or create lasting change. For this reason, if during the session the client has had a big shift or development, I will stop and re-ground the client in present time and allow the shift to integrate. That is when I will also check the gauges to see if more work is possible.

There can also be moments where what I see is different from what the client sees for themselves. And perhaps I may even think I know better (this is the biggest ego temptation of all). In all cases, I remind myself to defer to the client. There are several reasons for this. The client may be unready to see something; they may not feel safe enough to see it. I would do the client a disservice by forcing them into a knowing that is out of alignment with their process or even their highest good, and create negative karma for myself. If what I see is meant to be known, it will be known to the client in the right time and place. Or I will see when it is the right time or place to share the information. This is the equivalent of a tour guide pointing out the river meandering by or grabbing the client by the hair and plunging them into the nearby river. There is also another possibility, and that is that my information is wrong. The best of us have an 80% batting average. If so, perhaps I am in my analyzer and I have merged and am transferring my story onto their story. This is a sure sign that I am in analytical mode, and is a reminder to move back into intuitive space.

One note here: healers do not operate in a vacuum. We are all part of an extremely complex interwoven creation ecosystem. You can count on having shared life experiences or lessons with your client. Experientially, I would say that when I am

working on an issue, I will magnetize those whose spirits are also working on that issue. As we say at The Academy, “Give a healing, get a healing”. But again, we must apply the utmost subtlety and discernment to allow our own energetic healing to occupy some background or over-arching channel, as we remain focused on our present goal: “the needs of the client in front of us”. That will and must always keep us anchored in present time and our present time mission and away from merging experiences or becoming distracted by our own healing. The overarching presence of the healing of all humanity will roll itself out of its own accord. Actually, that healing energy is directing US. We are the instruments, and as such do best to focus on our part. Paradoxically, we then gain entrance into that quantum field of intuitive information and pure love.

To assist in this boundary, The Academy trains us to work with healing guides in the beginning. This assures that we stay in a place of neutrality, and truly embody the understanding that we are not responsible for the healing. We are witnesses, vessels for the work of healing, and must maintain neutrality for this channel to stay pure and powerful. The goal is to work spirit to spirit, meaning just my spirit talking to the spirit of the client across from me. Again, staying in intuitive meditation allows me to keep that connection open and clean, not dipping into my or my clients personality. It cannot be stated enough that the integrity of the information we receive comes from clinically establishing a high integrity setup. For example, if you Google a question on the internet, there is a lot of information available. However you are only interested in the high quality, well-researched information from the best sources. Not Maeve the opinionated maven from Ft. Worth, TX. A clean and boundaried energetic setup determines the highest quality information for the highest good.

As I mentioned, The Academy also has a set up where we work together as a group on a single client. There is one person, or moderator, who runs the Panel. As a Panel Moderator, my first concern is again the client. Are they deeply grounded? Are they ready to receive information? Are they happy? Scared? Full? Sad? Feeling safe? When they are grounded and ready, I spend time checking in with the other panel members to see what they are seeing. I create time and space for each panel member to make their contribution and complete their energetic work. However, the clients’ needs are always in the forefront. Only if they are feeling safe, ready and receptive, do I turn my focus to the other Panel members.

If we are doing a short “speed” Panel, my first concern is still the client. I will try to pick one thing to work on, and let that one thing unfold, to make sure that I do not overwhelm the client in a short amount of time. More is not better. I often see a barrage of images and get a lot of information very quickly. When this happens, I increase my own grounding and go deeper into my intuitive space, or go to a brown neutral color. The client must be the one to set the pacing. The quantity of information that I receive is secondary.

It is so important to hold these boundaries of integrity. Otherwise we fall into the different group of readers who do not respect these boundaries and cause energetic injury or damage to the client and to themselves. And in this case, we do not receive the work or the healing either, which is, among many other things, time spent out of the ego and safely nestled into the world of intuitive awareness, the wordless information grid, the mystery of the unknown.

Perhaps most importantly, the most valuable thing we can truly offer another is our own healed presence. Our expansive witness. To hold the deep, silent, bounded field of the grid of information in place for another to walk confidently through, held and witnessed — now that is healing.

Resources for Further Study

Further Reading

David Feinstein PhD *Ethics Handbook for Energy Healing Practitioners* (2012)

The Place of Alternative Medicine in Medical Care

Report: “Can Alternative Medicine Be Integrated into Mainstream Care?”
<https://nccih.nih.gov/news/events/012301>

About Codes of Ethics

Center for the Study of Ethics in the Professions

Why Ethics Codes?

<http://ethics.iit.edu/ecodes/introduction>

Authoring a Code of Ethics

<http://ethics.iit.edu/ecodes/authoring-code>

Sexual Advances by the Client

<https://www.themuse.com/advice/how-to-handle-sexual-harassment-from-a-client>

Other Codes of Ethics

Reiki Therapists

<http://iarp.org/iarp-code-ethics/>

Healing Touch Therapies

<http://www.healingtouchprogram.com/resources/htp-ethics/code-of-ethics>

Energy Medicine Code of Ethics

http://innersource.net/em/images/downloads/EEM_Ethics_Code.pdf