

Herbalist - Carolyn Smith, LLC
carolyn@carolynherbs.com

Statement of Credentials/Educational Background

- In practice as an Herbalist doing client consultations since 2013
- Completed Lise Wolff, Registered Herbalist's, (<http://www.herbalistlisewolff.com/index.html>) Three Seasons Herbal Intensive in 2010, and apprenticed with her for several years starting in 2012
- Worked as the full time seasonal intern for 6 months at Red Clover Herbal Apothecary in Amery, WI. Studied with and assisted Nancy Graden on the organic herb farm with cultivation, harvest, and production of herbal products
- Worked in retail with natural health care products at Whole Foods (Minneapolis, MN) and Mastel's Health Foods (St. Paul, MN)-Completed a 10 week intensive residential internship at HerbPharm (a national commercial herbal product company: <http://www.herb-pharm.com/>) during the summer of 2013, working on their organic farm in Williams, Oregon, cultivating medicinal plants and studying extensively with a variety of herbalists, naturopaths, and herb farmers while there
- Completed two extended courses with Martin Bulgerin (BioPsciences Institute: <http://www.biopscinst.com/bpi/>) on Flower Essences
- Taken classes with Herbalist, Matthew Wood (<http://www.matthewwoodherbs.com/>), Lise Wolff's own teacher/mentor, and well published Midwestern Herbalist who has been in practice since 1982
- Extensive Organ Systems Class (25 hours) with Registered Herbalist and Midwife, Erin Piorier
- Studied ethnobotany, ethnopharmacology, and traditional plant usage in Hawaii with Kathleen Harrison, Dennis McKenna, and Momi Subiono for a 3 week intensive course through the University of Minnesota Center for Spirituality and Healing
- Earned a Masters of Liberal Studies in Spring 2013 through the University of MN, incorporating classes from the Center for Spirituality and Healing into a thesis which focused on changing paradigms of body and healing metaphors through the lens of alternative medicine
- Teaching classes in herbal medicine since 2017 at various locations including Farm Table (Amery, WI), The Future Minneapolis, Minneapolis Community and Technical College for the Herbal Studies Program, the Creators Space in St. Paul, MN, and the Annual Herbal Education Festival in Belle Plaine (Lise Wolff and Erin Piorier)
- Spoke at the October 2018 North Country Herbalist Guild meeting, topic presented - Metaphors of Healing, the Body, and the Environment

THE STATE OF MINNESOTA HAS NOT ADOPTED ANY EDUCATIONAL OR TRAINING STANDARDS FOR UNLICENSED COMPLEMENTARY AND ALTERNATIVE HEALTH CARE PRACTITIONERS. THIS STATEMENT OF CREDENTIALS IS FOR INFORMATION PURPOSES ONLY

Theoretical Approach

As an herbalist, I incorporate concepts from Western and Eclectic practitioners including traditional methods of homeopathic specific indications, concepts of organ systems and tissue states, tongue diagnosis and pulse testing and standard conventional concepts of anatomy and physiology. Herbal protocols are personalized and developed from a holistic approach based on individual circumstances and indications. My approach is modeled after Lise Wolff's use of herbal medicine: I use mostly self prepared local abundant plants as medicine, the power of subtle small doses of plants in tincture form for healing, I value and work to carefully listen to people and their pulse to hear what they need, I understand the body as multiple organ systems working together in balance as a whole organism, and look to organ systems and tissue states to recognize underlying health problems that may cause a variety of physical and emotional ailments, and I believe that effective herbalism and health care acknowledges the body's innate ability to heal itself.

Complementary and Alternative Health Care Client Bill of Rights and Service Agreement

In Minnesota, the right of the consumer to receive complementary and alternative care from unlicensed providers is protected by law. The State requires that the practitioner provide the following information to you. If you have difficulty reading or understanding this information, please discuss this with me. Before I can provide you with any service, you must sign this statement attesting that you have received this Complementary and Alternative Health Care Client Bill of Rights.

Client's Rights

- Reasonable notice of changes in services or charges;
- Courteous treatment free from verbal, physical, psychological or sexual abuse by the practitioner;
- Has access to the records of the visit (in accordance with section 144.335 Minnesota statutes);
- May seek other, similar services in the community, or information about such services;
- May refuse services or treatment, unless otherwise provided by law;
- May switch to other providers after having begun with this provider;
- 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;
- Records and transactions with the practitioner will be kept confidential unless release is authorized in writing by the client (see note on previous page);
- May assert these rights without retaliation

Professional Supervision - The consumer has the right to file a complaint with the appropriate state office:

Minnesota Dept of Health Health Occupations Program
Office of Unlicensed Complementary and Alternative Health Care Practice 85 E Seventh Place, Suite 220
Box 64882 St. Paul, MN 55164-0882

Fee Chart for services: Fees are payable at the time of service

Service	Length/Quantity of Service	Fee (Flat Rate)
New Client Initial Consultation	1 1/2 - 2 Hours (includes remedies)	\$90.00
Follow Up Consultations	Approx 30-45 minutes (includes refills)	\$45.00
New Issue Consultations (for existing clients)	Approx 60 minutes (includes new remedies)	\$75.00
Quick Pulse Check and Refill	Approx 15-20 minutes (includes refills)	\$25.00

Each person is unique and all herbal protocols and service periods will vary. Average length of herbal remedy protocols is about 3 months consistently using recommended herbs under dosage guidelines with 1 to 2 follow up consultations in 3 to 5 week increments

**I do not accept Medicare, Medical Assistance, or any type of insurance coverage. I may provide reduced fees and payment plans under certain circumstances at my own discretion and under separate agreement with clients*

Cancellation: A 24-hour notice is required for a change or cancellation of appointment. A fee of \$25 is charged for a missed appointment or lack of 24-hour notice.

Remedy Usage Consent

The herbal remedies that may be suggested and provided for clients in consultations is a mixture of self prepared (collected locally, carefully, and sustainably), and commercial products and is considered optional on the decision basis of the client. The client is aware that they are never required to use the remedies suggested in consultations, and I will provide resources so that they may seek other sources for supply of remedies if preferred or desired.

Electronic Communication

The client agrees that all electronic communication between client and practitioner may become part of the client file. The client certifies that they are aware that electronic communication, because of problems inherent with electronic media, cannot be guaranteed confidential, and if this is a perceived problem, will use other communication methods.

Informed Consent

This form is the basic agreement of services between client and herbal practitioner. The client attests that the practitioner has answered all his/her questions about services and they have explained the potential risks and benefits of services. The client understands that, although there may be benefits of services, change and symptom relief are not guaranteed and no warranty as to effectiveness is made by the practitioner.

I have received a copy and understand the Complementary and Alternative Health Care Bill of Rights Signature of Client or Guardian

Printed Name

Signature/Date

**Optional*

Confidentiality of your personal health information is protected by law. In my practice and studies, it would be helpful for me to use your case results as anecdotal provisions in gaining membership with herbal associations, use in writings (may be published), or in educational settings when working with students. If you give permission for me to use your case history in this manner (information would be transmitted without giving your name or personal information which would identify you in any manner), please sign below:

Printed Name

Signature/Date