



# ALLERGY CLEARING TECHNIQUE

NAME \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

By signing and initialing you acknowledge the following understandings about Allergy Clearing Technique:

The basic concept behind this Allergy Clearing Technique work is finding what the body is currently seeing as an enemy and enabling the body to recognize that same substance as a friend. A physiological response called an Occipital Drop check is used to determine the body's response to these substances. This same OD check is also utilized in KST. This work also involves making sure that all the components necessary from the entire digestive tract, respiratory tract, waste elimination tract and blood components are recognized and interacting with the body properly.

**"ALLERGIES" "SENSITIVITIES" "REACTIVITIES" "INTOLERANCE" - THEY ALL RESPOND LIKE ALLERGY**

## COST:

The cost for **Allergy Clearing Technique** is **\$150 for the initial 30-minute session** (includes a 7-day Food Journal evaluation or other allergy testing evaluation) and then **\$50 per five-minute follow-up session**. **The costs for Allergy Clearing Technique visits are separate from any other services in our office and cannot be paid for with any other plan.** This work is **not** covered by insurance. **No** insurance receipts will be generated for this work.

Initial \_\_\_\_\_

## APPOINTMENT TIME:

The **five-minute appointment** will be strictly adhered to, enabling as many of the Allergy Clearing Technique time slots as possible into the normal office day. If we need to take more time, we will charge for additional 5-minute time slots.

Initial \_\_\_\_\_

## HOW MANY VISITS?

The more allergies you have or the more complex the issues your body presents with, the more sessions you will need. For some people it may only take one or two visits, for others it may take many more. Our current patient results indicate the Allergy Clearing Technique benefits can last 24 months or longer. You will need to be rechecked if your symptoms begin to return.

Initial \_\_\_\_\_

SAFETY DISCLAIMER:

**Persons with anaphylactic allergies need to take special precautions.** You must check and see if you are cleared from your allergies under strict medical care to test and see how your body responds after clearing. **Doing the Allergy Clearing Technique does not guarantee that your allergies will be gone.** We have seen great results but we also understand there is a great variation in human physiology and perhaps other underlying issues that would prevent the body from being able to reset itself.

Initial\_\_\_\_\_

ALLERGY AWARENESS:

No system is perfect. We have found that blood tests done at different labs show different allergies or no allergies at all. We have seen where tests are “negative” but the person obviously reacts. We have seen allergies listed on blood and skin tests and no APPARENT reactions. We do not require blood or skin tests to do ACT but they are a good basic reference. Testing with the same lab with the same type of test after ACT can show improvements. It is not required to get retested but please share your pre and post tests.

Initial\_\_\_\_\_

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I, \_(parent/guardian name)\_\_\_\_\_ hereby give  
permission (until revoked in writing) to \_(provider name)\_\_\_\_\_ to provide  
Allergy Clearing Technique services to my minor child, \_(child name)\_\_\_\_\_.

Today's date:\_\_\_\_\_

X

\_\_\_\_\_  
parent/guardian signature