

My Happy Place Massage Studio

Healthcare Facility

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INTAKE:

Have you been tested for COVID-19? If yes, what type of test did you have?

When was your test?

What were the results?

Have you been in places with a high infection rate within the last two weeks (e.g., state designated “hotspots”)? If yes, please explain.

Have you traveled outside of Maryland in the last 2 weeks (plane or car)?

Where?

Please check if you are experiencing any of the following as a NEW PATTERN since the beginning of the pandemic:

Fever

Sore throat

Shortness of breath

Chills

Diarrhea, digestive upset

Cough

Loss of sense of taste or smell

Nasal, sinus congestion

Fatigue

Sudden onset of muscle soreness (not related to a specific activity)

Rash or skin lesions (especially on the feet)

While information is still limited, the CDC indicates that these underlying conditions place people at higher risk for severe illness from COVID-19 (Please disclose before obtaining treatment):

› People 65 years or older

› Chronic lung disease

› Moderate to severe asthma

› Heart conditions

› Compromised or suppressed immunity

› Severe obesity (body mass index of 40 or higher) › Diabetes

› Chronic kidney disease › Liver disease

INFORMED CONSENT: Please take the time to read through some of the changes that will be happening for your sessions during this time and until further notice is given to me by means of the Maryland Department of Health: MARYLAND STATE BOARD OF MASSAGE THERAPY EXAMINERS, OSHA, FSMTB, and Governor Larry Hogan.

Changes to Session Scheduling: Staggered sessions between multiple Therapists to prevent crowding in reception areas, ample time between clients to properly use disinfectant products, Clients receiving massage will require pre-session health intake processes and communication (By Appointment ONLY protocol), 2- week follow up from Therapist to Client is mandated to ensure the client has not encountered any COVID-19 symptoms. This is done via an auto generated email.

Changes to Client Arrival Procedures: Clients will be asked to wait in their cars/ outside until their Therapist texts/ calls them to come in. Therapists will greet clients at the door. The use of a no-touch thermal temperature scan to confirm the client's temperature is no higher than 100.4°F [38°C] may be used. If a client has a temperature above 100.4°F, or if they have developed cold or flu-like symptoms or other symptoms suggesting illness since the pre-session phone call, their massage session will be postponed and we will suggest that the client call their primary care provider for consultation. If the client arrives wearing medical gloves, they must remove these gloves upon entry, as gloves may be contaminated with respiratory droplets from the client touching their nose or face. The client must have an acceptable face mask. If the client does not have an acceptable face mask, a disposable face mask will be provided.

Changes to Session Procedures: Friends and family of the client are not allowed to wait in the reception area while the client receives their massage, unless they are that client's legal guardian. Both the practitioner and client must wear a face mask during the session. The client must also wear a face mask from the time they enter to the time they leave the facility. The CDC suggests that COVID-19 infected respiratory droplets can be dispersed when people talk. For this reason, talking is limited to communication about pressure, warmth, and comfort while in the enclosed space of the session room. If possible, to process the client's payment, electronic payment is recommended, and rebooking the next session is to be in the session room after the client has had the opportunity to dress. The disinfection load on the facility is reduced when there is less opportunity for clients or practitioners to contaminate surfaces when performing these session procedures.

Clients at High- Risk: Unless otherwise directed by the client's primary healthcare provider, clients at higher risk of severe illness from COVID-19 should forgo massage while the virus is present in their communities. The CDC indicates that these underlying conditions place people at higher risk for severe illness from COVID-19: › People 65 years or older › Chronic lung disease › Moderate to severe asthma › Heart conditions › Compromised or suppressed immunity › Severe obesity (body mass index of 40 or higher) › Diabetes › Chronic kidney disease › Liver disease. Client must disclose to their Therapist if they have any of the listed underlying conditions.

Client Follow Up Procedures: Therapists will ask clients to share if they have developed any cold or flulike symptoms or tested positive for COVID-19. Massage practitioners are not authorized to share the health data of their clients without the client's written consent. However, should this client develop symptoms of COVID-19 within two weeks of a session, practitioners may use this Intake form as a form of consent to contact their local health department for consultation and guidance.

I understand that my name and contact information, might be shared with the state health department in the event that a client or practitioner at this facility tests positive for COVID-19. My contact details will only be shared in the event they are relevant based on suspected exposure date, and only for appropriate follow-up by the health department.

I understand that close contact with people increases the risk of infection from COVID-19. By signing this form, I acknowledge that I am being informed, of changes occurring to policies & procedures during the present time. I am aware of the risks involved and give consent to receive massage from this practitioner.

Client Print Name _____

Client Signature _____

Today's Date ____/____/____ 2020

Date of Service ____/____/____ 2020

Therapist Signature Upon Completion of Service _____

State of Maryland Department of Health License No. _____