

Disclaimer

We, the American Traditional Chinese Medicine Society (ATCMS), a NY-based, nonprofit professional organization, would like to help you ease the discomfort caused by the COVID-19 infection by recommending and shipping to you certain herbal tea formulas, at no cost.

These herbal formulas have been reviewed and recommended by our expert committee, which includes MD physicians, herbalists, researchers, and experts with experience in managing COVID-19 patients in both the USA and China.

To the best of our knowledge, these herbs are considered safe and useful in the management of symptoms in patients with COVID-19 infections. Severe adverse effects have not been observed by the practitioners so far, but mild reactions cannot be ruled out in certain individuals who tend to be highly sensitive to all kinds of supplements and/or food.

Please note the following facts and our requirements:

1. Your symptoms and medical history will be evaluated by one or a group of specialists who practice Chinese medicine locally. All volunteer specialists in this task have had substantial education, training, and experience with herbal formulations in Traditional Chinese Medicine.
2. Based on your description of your symptoms, an appropriate herbal formula will be recommended by the specialists. The formula may reduce your discomfort due to the coronavirus infection.
3. We will arrange the pickup or shipping of the herbal formulas.
4. During the time that you are taking the herb teas, we will have a specialist follow up on your conditions. We also suggest that you let us know how your body responds to the herb tea in the course of this process and after you finish the herb tea. This information will benefit you and others whom we will serve.
5. Please note that the herbal formulas you will take are considered to be dietary supplements and are not US FDA approved for the treatment of coronavirus.
6. In order to select the appropriate herbal formula for you, we need your consent to provide us your medical history and your current symptoms. We will follow the HIPPA guidelines. Your medical information will not be shared with any individuals and/or organizations without your permission.
7. We want to make clear that it is your decision to choose to take the herb formulas.
8. In accepting this service, you understand that neither ATCMS nor volunteers working for this project have any legal liability for any consequences of taking these herbs and you agree not pursue any lawsuit regarding this or related matters.
9. It is possible that some patients' conditions may change from mild to severe within a short period of time, and therefore we want to emphasize that it is essential that you communicate with your family doctor and/or other medical providers as frequently as needed regarding your medical condition.
10. It is important to fully understand these disclaimers. You may ask other English-proficient personnel to translate this disclaimer for you if needed.

Please print this page, type your name, sign and date it. You may scan or take a photo of this signed document and send it back to us via email, text, any other social media or regular mail (please request a mailing address).

Your Name (Print) _____

Signature _____ Date _____