

NAHA Case-study Contest

Objective: Submit a detailed case-study from your own research working with pure essential oils.

Requirements to participate in contest:

- Must be a current Member of NAHA
- Must be your own work
- Must have your participants sign a release waiver agreeing to be included in the case-study and that this study may be posted on the NAHA website and NAHA publications in the future. (Names of participants will not be made known and their confidentiality will be safeguarded).

Details to include in your case-study:

- Case-study must include 5-10 people
- All participants must sign a consent form
- Must use the same exact essential oil/carrier on all participants (include the type and brand of essential oil and carrier that were used for the case-study)
- Use same application method (topical or inhalation) for each participant
- If participants are to use the oil for at home, they must receive written instructions and a form to note their date of use, application method and outcome
- Use a visual analogue scale from 0-10 (where 0 is no complaint and 10 is the worst possible) and indicate the level before and after the aromatherapy application.

Example: My headache pain is an 8. After inhaling the peppermint essential oil, I'd rate the headache pain at a 6. After 1 hour, I rate the pain at a 2.

Basic Foundation Case-study intake form (taken from Dr. Buckle's article):

1. Health History Intake Form should include: age, history of disease/current health issues, medications, supplements, diet, sleep patterns and known allergies. Any drug or complementary therapy they have tried before.
2. Date of commencement of aromatherapy method (inhalation/topical)
3. What essential oil used and why, what percentage and why, when and how
4. Follow up in hour, day, week or month depending on your expected outcome
5. Results
6. The report should be very succinct – less than 3 pages
7. Most importantly, be objective, not subjective
8. Avoid using more than one essential oil, and other modalities such as scented candles, body or energy therapies, or music

Submission Requirements:

- Use Word Doc format; font: New Roman Times 12 pt in black
- Do not embed page numbers or images
- Any images must be submitted separately via JPEG format (300dpi or higher)
- Include your bio, contact information and headshot with your Contest Application

Prizes Awarded: (Case-studies will be judged on observation and documentation, overall content and submission requirements. Failure to submit participants' signed consent form and NAHA Contest Waiver Form will result in disqualification from the contest.)

- Free NAHA Membership for one year
- Your Case-study published on the NAHA website and in an issue of the E-Journal
- Dr. Jane Buckle's Book; Clinical Aromatherapy; Essential Oils in Practice

NAHA Case-study Waiver Release Form

Please Print Clearly

Date: _____

Name of Person Conducting Case-study: _____

NAME: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Best time to reach you: _____

Email: _____

Additional
information: _____

By signing the Case-study Waiver Form I give NAHA permission to use my case-study information including any images for posting to the NAHA website areas and for publication in any NAHA resources such as the NAHA Aromatherapy Journal, E-publications, newsletter and email. I understand that my participation in the case-study contest is voluntary and that I will not hold NAHA responsible or liable for any issues that could occur from participating in the case-study process. All case-study contest submissions and materials are non-returnable.

Case-study Participant Name (Print): (this will be kept confidential) or assign the participant a number for identification. Example Case-study Participant #1

Case-study Participant's Signature of Release:

Organizer's Signature of Release:

Date Signed: _____ Date Received by NAHA Office: _____

Office Notes:

**NAHA Case-study Contest Application Form
Please Print Clearly**

Date of submission: _____ **NAHA Membership Level:** _____

Name: _____

Credentials to be listed after your name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Cell:** _____

Best time to reach you: _____

Email: _____

Website: _____

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I understand that NAHA has the right to refuse acceptance of any materials submitted. NAHA has the right to cancel the contest at any time due to lack of participation or insufficient submission requirements.

Case-study Organizer's Printed Name:

Organizer's Signature of Release:

Date Signed: _____ Date Received by NAHA Office: _____

Office Notes:

Visual Analog Scale Example

Participant's Case-study Number: _____ Date: _____

(Use an identification number that matches participant's assigned case-study number. Keep a copy of each dated individual visual analog scale with each participant's case-study results.)

No pain |-----| Pain as bad as it could be
Mild Moderate Severe

No pain |-----| Pain as bad as it could be
0 1 2 3 4 5 6 7 8 9 10