

## Office Policy and Notification

**Appointment Courtesy:** Patient reminder calls are made prior to appointments. Please be advised it is the patient's responsibility to keep up with appointments.

**Appointment Cancellations:** if you have an appointment which you cannot keep it is very important that you give us 24 hour notice to allow another patient to fill your slot. In an effort to discourage "no shows" we impose a \$40.00 charge for patient appointments that are missed or cancelled after the 24 hour time frame. You are required to pay this before making another appointment.

**Prescriptions Refill Policy:** Please try to keep all your prescriptions up to date during your office visits. If your prescription has expired, you are likely due for an office visit. If we renew for only one month, please make an appointment during that period. In order to minimize errors and maximize efficiency, we communicate with pharmacies as prescription request require physician review. Allow 72 hours for refills. Prescriptions **WILL NOT** be called in by the on-call physician. Help us keep your medications up to date.

**Payment for Services:** Is required at the time of your visit (full payment or insurance co-pay, whichever applies to you). We accept cash, checks Visa/MasterCard. **There is a \$50.00 return check fee.**

**Fee for Completion of Forms, Reports, and Letters:** this is a non-insurance covered service which requires time from administration, nurses and doctors; therefore, a fee may be charged for the completion of forms or the writing of a letter. You will be advised of this prior to completion of requested work.

**Patient Information and Insurance Cards:** Your personal information sheet and insurance card are an important part of your medical records; it is your responsibility to make sure that you update this information at each visit to keep your record current. It is necessary to keep your insurance and contact information updated to ensure you are not incorrectly billed for payment which may be the responsibility of your insurance company.

**Transferring of Records:** All patients must sign a records release form to have their records copied or to send them to another provider or organization. Copies will be provided to the patients and a fee is charged for this service following the Code of the State of Virginia.

**Results:** We call on all testing once reviewed so if you have tests ordered by the office and you have not heard from the office in 7 working days, we ask that you call for the results. If you have tests done by a Specialist, you will need to contact the Specialist for the results.

Patient Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_