

PATIENT-DOCTOR AGREEMENTS

The purpose of this agreement is to allow us to more completely serve you and for you to get the best results in the shortest amount of time. It is in our experience that those patients who follow through with these agreements get the best results.

SIGNING IN

When you arrive, sign in. You will be called and assigned to a treatment area in the order you are signed in for the Doctor. Rest and relax, the Doctor will be with you as soon as possible.

CELL PHONES

Cell phones must be TURNED OFF or ON VIBRATE while in the office. This includes the waiting room, adjusting rooms and therapy rooms. Turning your cell phones off prevents other patients from being disturbed and from taking time away from your appointment with the doctor.

MISSING OR CHANGING APPOINTMENTS

The Doctor has set up a specific course of treatment for you. A certain number of treatments in a set amount of time are required to get the results we both desire. Thus, if you need to change the time of your appointment, plan to come another time the same day, or if the same day is not possible, it is important that you make up the missed appointment within one week.

APPOINTMENT TIMES

We will set up a specific time for your adjustment. Try to be prompt as the doctor has set this time aside to detect and correct vertebral subluxations and during this time that is all he will do. If you come at another time, you may have to wait a few minutes, as the Doctor also set aside times to see new patients and conduct extended consultations. We value your time and do not want you to wait needlessly. If you wish to set down with the doctor to discuss your case, a specific Doctor/Patient conference can be arranged at no additional charge.

PAYMENT OF BILLS

We will expect you to honor the financial agreement you make with our office. In order to serve you better, please plan to make payments at the front desk after you go to the back office for your adjustment. Upon being released from care, a three-month time period is allowed for settlement of your account. If settlement has not been reached within this time period, or if you have suspended or terminated your care without your Doctor's approval, payment for service is due immediately.

PROGRESS EVALUATIONS AND RE-EXAMINATIONS

During your treatment series, re-examinations and progress reports will be done on a regular basis.

COMMUNICATION

Please communicate directly to your Doctor any upsetting matter such as waiting too long, rudeness by any staff member, failure to understand treatment, need for extended consultation, etc. We are here to serve you. Your input is important will help us to help you as well as others.

CASH PATIENT FINANCIAL POLICY

We request that 100% of the first visit be paid at the time of the first visit. For your convenience, future payments may be arranged at the first visit of each week. We are happy to accept your check, MasterCard, Visa, or American Express.

MAJOR MEDICAL/GROUP INSURANCE

You are expected to make a payment toward your services on the first day in this office. Complete the information on the Insurance portion of your paperwork. Also any checks sent to your home by the insurance company must be brought or sent to our office within three days.

AUTO ACCIDENT/PERSONAL INJURY

You are usually covered 100% for these injuries. You are responsible for obtaining an insurance form or address to which we send statements for you care. You are also responsible for reporting your accident to the insurance company and your agent.

MEDICARE

Medicare DOES NOT PAY for EXAMINATIONS and X-RAYS. Medicare will cover a portion of your visits after your deductible is met. Once Medicare benefits are exhausted, you are responsible for payment. Once that limit has been reached, you are responsible for payment. Don't hesitate to ask your insurance coordinator about special plans for which you might be eligible.

I, _____ understand the above policy and agree to abide by it.
(PRINT NAME)

(SIGNATURE)

(DATE)

