UMPQUA COMMUNITY HEALTH CENTER

# OFFICE POLICIES

The nature of our Practice is to give our patients the utmost in care and services. Please excuse any delays. We will give you the same careful attention as soon as possible.

**MAKING APPOINTMENTS:** Please be as specific as possible regarding your area of concern. This will help us to schedule the proper amount of time necessary for your care.

**MISSING APPOINTMENTS**: Please notify the Clinic as soon as possible if you are unable to keep your appointment. Canceling appointments less than 24 hours in advance could result in a "no show." This also includes referral appointments to outside clinics, physicians, and walking out on your appointment. Our answering service is available 7 days a week, 24 hours a day for your convenience. After three times of not showing for your appointment without first calling to cancel you may no longer be seen at Umpqua Community Health Center.

**BEING LATE FOR APPOINTMENTS: Please be at least 15 minutes early for your appointment. Your appointment time is allotted and your check-in must be complete before that time. If you arrive after your appointment time as a new patient or greater than 10 minutes after your appointment time as an existing patient, you will be rescheduled for another appointment or may be seen the same day if there is a cancelled appointment. _____(Patient or responsible party initials)**

**LAB AND X-RAY REPORTS:** Your lab and x-ray results are part of the total picture of your health and must be analyzed by your health care provider in light of your history and physical exam. When you have a lab or x-ray there will be additional charges that you are responsible for. Please check with that office before you have the services. You will be notified of your results, or your provider will discuss your results at your follow-up visit. **Please allow up to 2 weeks for this process.**

**PRESCRIPTION REFLL POLICY:** Please call your pharmacy and request a refill, even if it states "no refill" they will notify us. **Please give us 48 to 72 hours to process your refill.** We will review your chart and notify the pharmacy of the practitioner's decision. Please notify the pharmacy 1 week before your meds are finished. **It is your responsibility to monitor the amount of medication you have.**

**SAMPLES**: **These are provided if available. When you need more samples please notify the Clinic at least 48 to 72 hours in advance. This gives us time to notify the practitioner and check our supplies.**

**REFERRALS FOR OREGON HEALTH PLAN PATIENTS:** The Oregon Health Plan requires us to submit a request for referral when the practitioner orders a specialist consult. The process can take up to 1 week or sometimes longer. We will contact you when this process has been completed and instruct you to call the specialist to make your appointment. Please be patient. It takes time to get the approval.

**PAYMENTS: Payments are expected at the time of service. You will be told what your minimum expected amount will be for each appointment. The amount could be more according to the procedures done. If you are unable to pay at the time of your visit your appointment may need to be rescheduled. _____(Patient or responsible party initials)**

I have read the above and agree to the terms provided.

Signature:_____Date:_____