

Functional Medicine Policy - non DPC members

Welcome to Holistic Wellness. I am happy that you have chosen to come to me for your complementary healthcare. The office policies at Holistic Wellness are designed to assure that I'm able to provide the quality of care you expect, and that all of the patients are able to receive their care promptly and with minimal waiting times. This letter explains the office policies. Please take a few minutes to read it, sign it and return to Holistic Wellness.

The undersigned acknowledges that he/she has requested healthcare services from the Holistic Wellness. Many of the therapies offered at Holistic Wellness are considered unconventional by mainstream medical establishment. Although some treatments have been in continuous use for a long period of time, they have been deemed "unproven" by such organizations as the American Medical Association, the Food and Drug Administration and certain insurance companies. Any therapy suggested to you can, of course, be refused and/or terminated at any time to receive only conventional therapies without the use of alternative or complementary modalities. Under no circumstance are you obligated to accept any treatment offered to you.

## **Disclosure of Information**

All information provided to Holistic Wellness is strictly confidential except for the following circumstances:

- The patient authorizes the release of information by signing a release form naming the specific person to receive the information.
- Certain circumstances where we are required by law to release information (e.g. court subpoena, suspected abuse, etc.)

## **Financial Terms**

You are expected to pay for your care in full at the time services are rendered. I will provide you with a receipt so that you may submit a claim to your insurance company for reimbursement. I do not participate with any insurance companies, and do not submit insurance claims. There is a \$15 charge for copying medical records, and there is a \$25 fee for returned checks.

## **Canceled/Missed Appointments and Late Arrivals**

When you make an appointment, I am reserving time on my schedule that is no longer available to other patients. If you cannot make an appointment, I ask that you cancel your appointment at least 24 hours in advance. You can leave a message 24 hours/day on Holistic Wellness's voice mail at 603-305-9964. Missed appointments will result in a \$50 charge.

Late arrivals can create scheduling problems with other patients. If you must be late, please call to let me know. If you arrive more than 15 minutes late, I may not be able to accommodate your appointment without interfering with the scheduled times of the other patients.

## **Acknowledgement and Agreement**

I have read the above information and thoroughly acknowledge, understand, and agree to all of the above information, including the financial terms as stated above.

Patient (or Parent/Guardian) Printed	
Signature	Date