

**PATIENT NOTICE**

***Patients please read the following:***

1. There will be a \$25.00 charge for broken appointments unless 24hr notice is given.
2. Payment is expected at the time services are rendered unless prior financial arrangements have been made.
3. Please notify the front desk of any change in *address, phone number, or insurance coverage* prior to your appointment. If you supply this information on the day of your appointment, you will have to wait until we can verify all information. In some instances, you may be asked to reschedule.
4. It is your responsibility as a patient to make sure we have a valid referral for your visit or you will be asked to pay for the visit in full.
5. **Test Results** will not be given over the phone. They will be discussed with the patients when the patient returns for the follow up visit.
6. There is a 35.00 fee for copies of medical records, FMLA forms, disability forms, and attending physician statements needing to be completed. This fee is waived for copies of records sent directly to another attending physician.
7. There will be a \$25.00 handling fee for returned checks.
8. Your medical information cannot be disclosed due to HIPPA regulations unless you authorize this office to do so in writing. If you wish to have your spouse, partner, or significant other obtain medical information, please write that person(s) name below.

Please allow \_\_\_\_\_ to access my medical records, lab results, and/or disclosure of my financial records.  
 Relationship to patient, \_\_\_\_\_.

\_\_\_\_\_ I do not wish to have any of my medical records, lab results, or disclosure of my financial records released except to myself.

9. I have read and/or been supplied with a copy (copy at patient request) of the HIPPA policies of Dr. Ata Ahmad. \_\_\_\_\_(initials)

**There will be \$500.00 charge for any missed and/or cancellation of surgery without a notice of 3 business days. \_\_\_\_\_ (initials)**

***I have read and understand this Patient Notice.***

\_\_\_\_\_  
 Patient Signature

\_\_\_\_\_  
 Date