



## PATIENT GUIDELINES

*The following guidelines have been established for the mutual understanding and benefit of our patients and physicians.*

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### **Services:**

Our Physicians provide musculoskeletal specialty services only. Patients are expected to have or arrange for a primary care physician. Our Physicians do not treat non-operative chronic pain conditions.

### **Prescription Refill policies:**

If you are in need of a refill, please call our office during normal office hours. Refills of medications are handled during normal office hours and can take up to 24 hours to be processed, so please do not wait until you run out of a medication to request a refill.

No pain medications will be given to post operative patients beyond 90 days after surgery.

Our Physicians do not prescribe pain medications to non-operative chronic pain patients. Patients with chronic pain syndrome are referred to a pain management specialist for long term care.

### **For patients with health insurance:**

You and/or your referring physician are responsible for obtaining the required payor authorization(s) for your visit(s).

Co-pays and deductible balances are due and payable at the time of service. Any previous balance on your account is also expected to be paid at the time of service.

### **Private Pay patients:**

You are expected to pay for all charges at the time of service, unless other advance payment arrangements have been made.

### **If you are unable to keep your appointment:**

We ask that you call our scheduling department at least 24 hours in advance to cancel your appointment. Failure to do so may result in a \$30.00 "no show" charge to your account.

### **Disability Forms:**

There is a prepaid charge for any disability forms related to work or injury that you need your physician to fill out. Your physician will determine the charge for completing these forms based on the information requested and the time involved. Please allow 7 to 10 business days for the forms to be completed.

### **Medical Records:**

When a patient requests a copy of their medical records, if less than 10 pages are involved there is a charge for postage or shipping costs only, and, if more than 10 pages are involved there is a charge of \$10.00 + postage or shipping costs.

There is a fee for any medical records and reports requested by attorneys, insurance companies, disability carriers, etc. This charge will be determined based on the information requested and the time involved. The requesting entity shall be billed for any such charges.

### **Legal Notice for Ancillary Services:**

The Patient Protection and Affordable Care Act requires your physician to disclose ownership of in-office ancillary services, including diagnostic imaging. You may choose a facility other than The Orthopaedic Institute for your X-Ray or MRI. Below are some additional providers for your consideration:

**Gainesville:** NFRMC, Invision, Doctors Imaging Group;  
**Ocala:** Advanced Imaging, Radiology Associates, DOCs;  
**Lake City:** LCMC, Invision, Physicians Imaging

Additional physician-owned ancillary services include Physical and Hand Therapy, durable medical equipment, electromyography and nerve conduction studies. For a list of alternate providers for these services, please contact your physician.

*Thank you for your cooperation.  
As always, we appreciate the opportunity  
to help you achieve your wellness goals.*