ARUL DORAISWAMY, MD, APC The Pain Clinic

1264 East Latham Ave, Hemet CA 92543 31515 Rancho Pueblo Road, Temecula CA 92592 Phone (951)925-3600 • Fax (951)925-4600

OFFICE POLICIES

WELCOME TO THE PAIN CLINIC!

APPOINTMENTS

Initial consultations are generally scheduled only after a written referral is obtained from your current physician. Failure to keep your appointment wastes medical resources and decreases clinic access to other patients who suffer from pain. We understand that unforeseen emergencies happen, but continuing to cancel or "no-show" to appointments without at least 24hrs notice will result in either incurring a \$50 charge for every missed appointment, or being discharged from our clinic.

BILLING/INSURANCE

The charge for initial consultation is \$250, and each follow-up visit is \$100. The charge for office procedures varies, but is generally around \$500. Payment is due at the time of service, unless you have insurance for which Dr. Doraiswamy is a participating provider (in which case, your insurance will be billed for services provided). Co-pays and deductibles are due at the time of service.

PAPERWORK

We will do our best to fill-out disability forms and other paperwork for you, so long as Dr. Doraiswamy feels this is appropriate. However, paperwork takes time and resources to complete, so we will need to charge \$25 per page. More involved paperwork that involves disability assessments, physical exams, etc. will incur a higher charge, as they are more labor intensive.

MEDICAL RECORDS

Copies of your medical records can be faxed to other physicians upon receipt of your written request. We would be happy to provide you with a copy of your medical records as well, or send hard copies to other physicians, but there will be a charge of \$25 for copying and labor expense. Please provide us with at least 7 days to prepare the copies of your medical records.

CLINIC PAIN MEDICATION POLICY

You should take your pain medications only as prescribed, and you should not share them with anyone else. Contact our office immediately if you develop sedation or other side effects from your pain medications. Absolutely do not drive under the influence of opiate (narcotic) or other potentially sedating medications. Pain medications will only be refilled during office hours. Patients should contact their pharmacy 2-3 days prior to running-out of their medications, as the prescribing provider may not be immediately available to refill the prescription the day the request is made.

have read these policies and agree to the above stipulations.		
Patient name (please print):	Date of birth:	
Patient Signature	Date	
ACKNOWLEDGEMENT OF	RECEIPT OF NOTICE OF PRIVACY PRACTICES	
further acknowledge that a copy of the current notice	ractice's Notice of Privacy Practices, and have had the opportunity to rewill be posted in the reception area and is available on this practice's we ce of Privacy Practices at future office visits as any amendments are m	vebsite,
Patient Signature	Date	