

PATIENT- PHYSICIAN AGREEMENT

The desired patient physician relationship in this practice is a partnership in which the patient also assumes responsibility for her or his own health.

I, as a patient, understand that medicine is not an exact science and that the physician (Dr. Chene) who I am consulting is giving me advice to the best of her knowledge at the present time. I further understand that the physician's advice does not guarantee me freedom of future illness, disability or death. I understand that the knowledge base of medicine is continually expanding and follow-up visits or requesting specialty consultation are advisable if problems are not resolving as anticipated.

Dr. Chene recommends that patient's have an annual Physical Exam with their physician of choice. She requires this of patients who consider her to be their primary physician as this gives her an opportunity to update her patients on new preventive and risk reduction measures as well as offer standard health screening which is not typically done at sick visits.

While Dr. Janet Chene is usually available, it is not humanly possible to be available at all times. Due to responsibilities for young children at home Dr. Chene has taken privileges at Sid Peterson Hospital on a consultative basis only but does not admit patients. Should any of Dr. Chene's patients require admission to Sid Peterson Hospital the Emergency Physician will call Dr. McKenzie, the hospitalist (the "in house" doctor who is there all day), or the physician on call. These physicians typically call me to discuss admission and/or discharge plans so that continuity of care is provided. This has worked out very well.

In the event that an office visit is needed urgently and in the rare case that Dr. Chene is unable to accommodate this, the Franklin Clinic (across from Albertson's in Winwood Plaza) is open for urgent care Monday through Saturday 7 am-7 pm.

I also understand that Dr. Chene as a physician is acting in my own best interest and is not directed by any insurance company, pharmaceutical or supply company. It is also possible even though insurance is billed that the insurance may decide not to pay for services which are preventive in nature or that the insurance company deems unnecessary or non-covered and therefore I assume responsibility for bills incurred. I am aware that I can request an estimate of cost of visit beforehand and have some control over this based on how much time I spend with the physician in consultation. Please inform Dr. Chene at the beginning of visit so your concerns can be prioritized.

signature of patient or responsible party

date

Although Dr. Chene is willing to take a “treat the whole patient” approach, Many insurance companies, particularly Medicare will likely audit her if the patient visits are too often longer than 15 minutes. In order to help make the best use of her time with you please indicate what type of visit and style of practice you prefer:

Check one for type of visit preferred:

I want Dr. Chene to give the amount of time she feels is necessary to explain both conventional an alternative options and address all problems I may bring to the visit without having to schedule as many additional appointments to cover it all. I realize there may frequently be additional “alternative/holistic medicine consult time” which I am willing to pay for as this will not be billed to insurance. The hourly rate is similar as a typical local primary care (not specialist) physician rate at \$50-\$60 dollars per additional 15 minutes. This can be prorated.

I only want what my insurance will typically cover (20-30 minutes first visit and 5 - 15 minutes on subsequent visits). I’m willing to limit my visits to one or two problems at a time. I realize Dr. Chene still wants me to have an annual physical exam whether or not it’s a part of my insurance plan benefits. You do not have to have a physical with Dr. Chene if you see her only for consult and not as your primary physician.

Style preferred for Doctor’s recommendations (check one):

Whatever needed to give me good care, even if additional costs to me.

Just what insurance is likely to cover (less talk, fewer options, less time)

also check one of these if it applies to how your feel:

Just make it simple. I’m not interested in why to do things just what to do.

Just patch me up doc, don’t ask me to change anything I’m doing.

I’m nearing the end of my life and want only comfort measures . I don’t want any prevention or intervention at this point to interfere with the course of illness. I have made an Advanced Directive for Medical Care which I have discussed with my family and will bring with me or put on file at the local hospital where I live.