

JEFFERSON COUNTY PUBLIC HEALTH
PATIENT CODE OF CONDUCT

YOU MUST PROVIDE STAFF WITH ACCURATE AND COMPLETE INFORMATION ABOUT YOUR FINANCIAL STATUS AND MEDICAL HISTORY.

YOU MUST REPORT CHANGES IN YOUR FINANCIAL STATUS AND MEDICAL CONDITION.

YOU MUST HAVE REALISTIC EXPECTATIONS OF WHAT THE STAFF CAN DO FOR YOU.

YOU MUST FOLLOW THE DOCTOR'S TREATMENT PLAN.

YOU MUST HELP YOUR DOCTOR HELP YOU; IF SOMETHING ISN'T WORKING, BE CLEAR AND THE DOCTOR CAN ADVISE ALTERNATIVE CARE.

YOU MUST PARTICIPATE ACTIVELY IN YOUR OWN MEDICAL CARE BY KEEPING REGULAR APPOINTMENTS. ANY LAB OR X RAY PROCEDURES OR REFERRALS MUST BE DONE IN A TIMELY MANNER.

YOU MUST NOT ASK THE DOCTORS FOR FALSE BILLS OR CERTIFICATES.

YOU MUST TREAT ALL STAFF WITH RESPECT. THE USE OF PROFANE LANGUAGE, THE DISPLAY OF AGGRESSIVE, HOSTILE OR COMBATIVE BEHAVIOR WILL NOT BE TOLERATED AND WILL BE GROUNDS FOR IMMEDIATE DISCHARGE FROM THE PROGRAM.

YOU MAY NEVER DISCUSS MEDICATIONS, SELL MEDICATIONS, OR ALTER PRESCRIPTIONS, IN OR OUTSIDE OF THE OFFICE, OR YOU WILL BE DISCHARGED FROM THE PRACTICE.

THIS PATIENT CODE OF CONDUCT APPLIES ALSO TO ANY CONSULTANT TO WHOM WE MAY REFER YOU.

By signing below, you acknowledge receiving the Jefferson County Public Health Department Patient Code of Conduct Policy.

Signature of Patient: _____ Date: _____