

# **Office Procedure Manual and Policies**

## **1. Medical Emergency:**

If a medical emergency occurs, dial 911 for EMS support and provide all pertinent information.

Administer first aid, CPR, or other appropriate procedures to the limit of your training and experiences.

Office staff must notify the doctor on the premises.

Document the event in a clear and concise manner.

## **2. Patient Scheduling:**

A patient must be able to schedule a routine appointment within seven (7) days; and

A patient should not have to wait more than thirty (30) minutes, on the average, following the appointment time prior to being seen.

An answering machine message directing patient to call the doctor at home or on his cell phone will be available when the office is closed.

## **3. Evacuation Plan:**

In an emergency that requires evacuation, lead occupants out the door, turn left and exit the main entrance. If this exit is blocked, unlatch any window and exit the building.

Occupants should be aware of alarm signals that tell them to evacuate.

Exit lanes should be free of clutter or obstructions.

The front desk workers are responsible for making sure the front of the office is vacant. The doctor will be responsible for making sure the back of the office vacant.

## **4. In the event of a robbery or other threatening behavior, follow steps below:**

Cooperate as much as possible.

If you are not being held, run as fast as you can away from the threatening person.

Contact "911" if possible.

Remember to observe all aspects of the person who is threatening you; clothing, height, weight, coloring, and other distinguishable features for later identification.

Office staff must notify the doctor on the premises, and the event will be documented.

## 5. Patient Confidentiality

Medical records are to be stored in lockable file cabinets. Records are to be clearly indexed and filed alphabetically.

Patients are to read a Notice of Privacy Rules form and informed consent form and sign that they have read the information.

Unless its release is authorized by the patient or compelled by law, all information about the patient gathered by the practitioner as any part of the doctor-patient relationship is kept confidential.

Billing and financial records are computerized and only available to staff with password clearance.

Treatment records are computerized separate from billing records on a secure system in the provider's private office.

All computers in office with internet access will have firewall and antivirus programs to thwart unauthorized access.

## 6. Non-Compliance with Clinical Advice:

All clinical advice including diagnosis or treatment recommendations and self-care measures is to be recorded in the medical chart.

If the patient proves to be non-compliant with clinical advice after three (3) documented reminders or (2) weeks of care, doctor or support staff will call the patient and provide instructions specific to their case.

## 7. Missed Appointments:

After three (3) missed appointments without a phone call, remove patient from schedule. Office staff should call patient to advise them of this.

## 8. Financial Policy:

Claims denied by the patient's insurance carrier may be the responsibility of the patient.

Payment plans will be made available if necessary, and care will be made affordable.

**Patient Signature** \_\_\_\_\_ **Date** \_\_\_\_\_