

# PATIENT COPY



## PATIENT GUIDLINES and CODE OF CONDUCT

Rock Springs Clinic exists to provide free medical care and medications for a variety of chronic illnesses to adult residents in the surrounding counties who would otherwise have no medical care. Our clinic is staffed with extremely skilled volunteers and medical providers. Patients and staff are to conduct themselves in a polite, respectful manner at all times. Failure to do so will result in immediate termination.

1. To qualify for treatment at the clinic, patients must be uninsured or underinsured (without primary care coverage), income must meet state-defined eligibility levels, and meet all Georgia Dept. of Public Health requirements.
2. Patients must recertify annually. Recertification will also include an annual donation for medication assistance. **It is the patient's responsibility to meet all requirements before April 20 each year in order to requalify. Failure to comply will result in suspension of all services until provided.**
3. Medications must be picked up by the patient within 3 months of notification. If you are requesting refills, you must bring your current medication bottle(s). **Milner** patients may pick up medications between 8:30-1:30 pm on Tuesday and 12:30-2:30 pm on Thursday. PAP (Prescription assistance) is available on Tuesday 8:30-1:30 pm. **Forsyth** patients may pick up medications on Wednesday between 8:30 and 12:00. PAP (prescription assistance) is available on Wednesday 8:30-12:00 pm.
4. As your primary care provider, you must inform us of any other healthcare provider(s) you see. The purpose for this is to avoid duplication of care and medication. Failure to do so will result in termination of care.
5. Patients are to contact Rock Springs Clinic for ANY medical information – no doctor/provider is to be contacted at their private office for any reason.
6. Any patient who is under the influence of drugs or alcohol, is disrespectful or disruptive with Rock Springs Clinic personnel or at any appointment to which we send you, will be subject to immediate termination.
7. Two NO SHOWS for a scheduled appointment could result in immediate termination of care and medication refills. This includes provider appointments, bloodwork appointments, nurse follow-ups, medication refills and any referrals arranged through the clinic. If you miss a bloodwork appointment, your follow-up appointment will also be cancelled.
8. Patient must **arrive at clinic with all medications at least 20 minutes prior to scheduled appointment**. If more than 15 minutes late for appointment, patient will be seen only if there is an opening left in the schedule.
9. Patient has the responsibility to follow provider's advice. Failure to do so will result in termination.
10. Rock Springs Clinic is allowed to act on my behalf to obtain free and reduced priced medication or request medical records. This includes but is not limited to signatures, phone communication, letters and fax.
11. Patients will be seen by the provider assigned to them and must be seen every 3-6 months to receive medication refills.
12. Rock Springs Clinic is a NO-SMOKING facility. NO SMOKING is allowed at any Rock Springs Clinic campus or on Church property, Monroe County Hospital property or adjacent properties. Anyone found to be smoking in these areas will not be seen at the Rock Springs Clinic.
13. The clinic is NOT a pain management or acute anxiety management facility. We will not prescribe narcotics for pain or acute anxiety. Help is available at local mental health and pain clinics for these problems.
14. **Disability:** Rock Springs Clinic was founded, and remains committed, to help patients improve their health to its greatest potential. The clinic is not equipped with the manpower or tools needed to properly evaluate, diagnose or document disability/lawsuit claims to the degree required in today's medical realm. We will make copies of any records from a patient's charts at the request of the firm representing the patient. Patients desiring in-depth disability evaluation need to go to another facility better equipped to deal with disability issues. Please **NOTE:** a records fee may apply.
15. Patient must provide phone number with voicemail as the clinic will leave messages regarding appointments and medicine pick-up. **Please make sure your mailbox is able to accept messages at all times.**
16. **I understand the above statements and know that failure to comply may result in my immediate discharge from Rock Springs Clinic.**