## **Patient Information**

Patients are responsible for all fees regardless of insurance coverage. It is the policy of this office to pay for services when rendered unless other arrangements have been made in advance.

Legal Name		Age		Date C	of Birth	
Home Address					Apt#	
City 2	Zip C	Code	I	Home Pl	none	
Work #	Ext _		Cell P	hone		
Social Security#		Drivers Lie	cense #			
Your Employer		Address _				
Spouse's Legal Name		Employer_				
Date Of Birth		Work#				
Pharmacy Name And Phone#						
Primary Care Physician		Phone# _				
Insured's	Infor	mation:				
Legal Name		Relationsh	ip			
Date Of Birth						
Employer			-			
Work#						
Person To Notify In Case Of Emergenc	cy (So	meone No	t In Th	e Same	Household)	
Legal Name		Relationsh	ip			
Home Phone#	Work	#			Ext	
Consent for treatment  ☐ I consent to treatment necessary for the care of is granted to release information as necessary  ☐ I hereby authorize payment of medical benefit rendered. I authorize any info be released to	of the to profits to	patient indocess and cobe paid dire	dicated complet ectly to	on this f e my clai the phy	im. sician for servi	ces
Signature					Todav	's date

This notice will set forth the office sharing arrangement whereby the physicians in this office provide quality medical care to their patients. Laura A. Bradford, M.D., P.A., Pattyann A. Hardt, M.D., P.A., Ruth R. Wiley, D.O., P.A., and Heather Neville, M.D. each have their own independent medical practice. In order for the physicians to keep their expenses low while providing quality medical care, the physicians share common office space and equipment. Although the physicians share common office space and equipment, the physicians do not have a partnership agreement. A physician in this office may provide "on call" coverage to assist another physician in this office in an emergency situation or on a short term basis. As such, there is a possibility that you may be required to contact another physician in this office instead of your designated physician. However, this in no way indicated that the physicians in this office have a partnership arrangement or share joint responsibility for patients.