

# VITAL HEALTH AND WELLNESS

Courtney Jackson, N.D.  
6018 SE Stark, Ste, 103, Portland, OR 97215 \* 503-802-7327 (phone) \* 503-473-8085 (fax)

## OFFICE POLICIES AGREEMENT

Dear New Patient:

Welcome to Vital Health and Wellness where Dr. Courtney Jackson offers naturopathic medical services. We look forward to providing you with high quality, natural healthcare. We encourage you to ask questions and to participate in all aspects of your health.

Dr. Jackson is open to receive calls and schedule client consultations on Mondays from 8am-4pm and on Wednesdays from 9am-6pm. All calls received after hours will be returned at the start of the next business day. Dr. Jackson can be available for consultation after hours by special arrangement.

Payment for services rendered is expected at the time of service. If immediate full payment will present major difficulties for you, please arrange a payment plan prior to your visit. Dr. Jackson accepts checks, credit cards, and cash. Checks should be made payable to "Summit Natural Health." For all returned checks, there will be a charge of \$50.00. On any accounts over 60 days past due, or over \$250.00, continued services will be on a cash basis only.

**1. Late cancellation fees.** It should be understood and agreed that all patients are expected to give 24 hours notice of cancellation of an appointment. Any late cancellation, or failure to keep an appointment, will incur a \$25.00 charge. These charges are due immediately upon receipt of an invoice, or at the time of the next appointment, whichever comes first.

**2. Telephone consultations and emailing.** It should be understood and agreed that established patients may call Dr. Jackson and consult for 5 minutes or less at no additional charge. Telephone calls of greater than 5 minutes, however, will be billed at a rate of \$20.00 per 10 minutes, or the appropriate pro-rata amount. These charges are due upon receipt of an invoice, or at the time of the next appointment, whichever comes first. It is agreed and understood that any telephone calls requiring clinical decision-making, supplement advice, or medical record-keeping may incur a telephone consultation charge. Likewise, Dr. Jackson will respond to emails of established patients who request clarification about supplements they are taking or clarification about assessments made during their consultation. Dr. Jackson will not provide email responses that require clinical decision-making, as she believes email is not the best forum for this.

**3. Herbs, supplements, homeopathic medicines, or other medical supplies.** Dr. Jackson may suggest medicines for you to take, which may be purchased either from Dr. Jackson or elsewhere. All supplements, herbs, homeopathic remedies, and other natural medicines purchased through Dr. Jackson are non-returnable and non-refundable unless there is a manufacturing or quality defect. Full payment for such medicines or supplies is required at the time they are dispensed.

**4. I give permission for the staff at Vital Health and Wellness and for Dr. Jackson to contact me via telephone or email** and leave a message that may contain appointment or medical information if I am not available. If this is not acceptable, I will signify my disapproval by writing my initials next to this statement. \_\_\_\_\_

I have read and understand the above-stated policies and the fee schedules of Dr. Jackson's and will comply with them in all respects. If my insurance company requires a release of my medical records, I hereby give my permission by signing this form. I also authorize payment of medical benefits to the provider for services described on the claim if Dr. Courtney Jackson submits claims.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Guardian if Patient is under 18 years: \_\_\_\_\_