

Ann O. Michael, DC, CC



Ph. (530) 859-0137

PATIENT AGREEMENT

Pacific Rim Chiropractic does not bill insurances. You will be provided, upon request, a Super Bill with the specific diagnostic and procedure codes, in which you may then submit directly to your insurance carrier.

Fees

Fees are expected at time of service.

Initial visit is \$120.00

Following treatments are \$65.00

Change of schedule

When you schedule an appointment with this office, Dr Michael has contracted this time for you. If for any reason, you wish to change that agreement, when humanly possible, please notify us 24 hours prior to your scheduled appointment.

This office charges for a missed appointment.

Cell Phones: You are welcome to speak on your cell phone outside the building. Please silence your phone upon entering the building.

Food; please eat or drink outside the building

Your Visit:

Dr Michael respects your busy life and will do her best to see you in a timely manner. Please arrive 10 minutes prior to our appointment time.

If you feel ill please call and reschedule.

Name: _____

DATE: _____

407 South Mt. Shasta Blvd, Mt Shasta California 96067 / www.pacificrimchiro.com