



OFFICE POLICIES

APPOINTMENTS: We schedule appointments Monday through Friday from 8:30 am - 11:20 am and 1:20 pm - 3:50 pm. A 15-minute grace period is allowed for late arrivals. If you should arrive outside of that grace period, your appointment will need to be rescheduled and we will not be able to provide you with a doctor's excuse. Please call (210) 977-9080 and select option 4 to schedule an appointment. We ask that you call to schedule an appointment as we do NOT accept "walk-ins". We will make every effort to accommodate your child as soon as possible. We ask that you bring your ID, insurance card, and shot record to every appointment. For established patients, we will attempt to verify the insurance on file. If any changes occur, please notify us as soon as possible.

NEW PATIENTS: If your child is a new patient, please arrive 10-15 minutes early to fill out all necessary paperwork.

"NO SHOW" POLICY: This represents a cost to us, to you, and to other patients who could have been seen in the time that was set aside for your child. Any missed appointments without a 24-hour notice will be subject to a \$40 penalty fee. 3 or more "no shows" may result in dismissal of the family from VIVA Pediatrics, PA.

MEDICATIONS: All prescriptions will be written or sent electronically to the pharmacy on file. We will not prescribe any medications based on a telephone consult. Please be aware that for certain diagnoses an appointment will be required for a refill on that specific medication. If your child is needing a refill on ADHD medication, please call our office at (210)977-9080: listen to the prompts and select the correct option for prescribing physician's nurse. For any other medication refills, please contact your pharmacy.

WAITING ROOM: Eating and/or drinking is not allowed. Please do not bring food or drinks into our office. Please be aware that there are multiple physicians seeing patients on the day of your appointment, therefore there is no guarantee to be seen in the order of arrival.

DIVORCE POLICY: We honor the right of access for both legal guardians to obtain medical records, determine medical decisions, and bring in child unless otherwise restricted by legal documentation. This is the responsibility of the parent to provide. In the case of divorce or separation, the parent authorizing treatment for the child/children will be the parent responsible for those subsequent charges. If the divorce decree requires one parent to pay all or part of the treatment costs, it is the authorizing parent's responsibility to collect said fees from the responsible party stated.

FAMILY SERVICES: For all CPS/Foster Care/Adoption cases, please provide all legal documentation at check in. The designated individual(s) will be required to show ID. If any changes to the case occur, please update us immediately as we will continue to refer to what is on file. We offer no leniency in these types of situation or circumstances.



PHYSICIAN SIGNATURE FORMS: We are committed to protecting the security and privacy of your child's personal information. All forms must be picked in person by the parent or guardian on file. Forms will not be released to others without a written parental/guarantor consent.

Prices are as follows:

Physical Form \$10.00

FMLA Form: \$30.00

Disability Form: \$15.00

Pre-op Forms: \$15.00

Immunization Record: 10.00

Copy of Office Visit: \$10.00

PREVENTATIVE "WELL CHILD CHECK" VISITS: This type of visit (annual physical) includes a general exam, complete vital signs, vision/hearing screens, development questionnaires, as well as any routine bloodwork. Any other additional issues addressed during a well child visit does not fall under the "preventative" category and will be subject to copayments/deductibles/co-insurance as required by your insurance and must be paid at the time services are rendered.

MEDICAL RECORDS: We will provide a copy of your child's medical records upon written request. For records that you are requesting be sent to VIVA Pediatrics, PA, a Medical Release Form is required. We will fax to the practice you are requesting records from. If you are transferring to another physician, there is no fee associated to the transfer of records. We will provide a copy of the last physical and shot record on file to be faxed to your new primary care physician after receiving a Medical Release Form signed by you. If you are requesting Medical Records for your personal usage, there will be a fee assessed for the cost of compiling the record which depends on the amount of pages created. Please allow 30 business days for preparation.

EMERGENCY CARE: IF your child has a life-threatening emergency, please call 911. For medical advice outside of our normal business hours, you can call "22NURSE" or call us at (210)977-9080 to be connected with the on-call physician. If you must go to the emergency room, we advise using Methodist Children's ER- Medical Center, Children's Hospital of San Antonio- Downtown/Westover Hills, University Health Care- Medical Center, or North Central Baptist Hospital as they each specialize in pediatric care.

DAMAGES TO OUR OFFICES: If any damages to our office or equipment occur by a patient or family member of the patient, guarantor will be held responsible and charged for said damages/repairs/replacement(s).

MOTOR VEHICLE ACCIDENTS: We do not provide treatment for motor vehicle accidents nor do we accept third party billing.

BILLING INQUIRIES: Questions about a bill should be directed to our billing department at 210-977-9080, press *.