



DESERT SUN GASTROENTEROLOGY

DSG Policies Consent Form

7140 E Rosewood St.
Tucson, AZ 85710
Phone: 520.547.4900
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Craig G. Gross, MD / Gary P. Gottlieb, MD / John K. Tsai, MD / Cristiana Bortuzzo, MD

Policies for Desert Sun Gastroenterology

Failure to cancel an appointment within 24 hours or no-shows for appointments will be charged a \$25.00 fee.

- Please note that if you are a patient of Dr. Craig Gross, MD, at the time of your appointment only the patient will be allowed in the examination room. After the physician has examined the patient, he will briefly answer questions from a family member.
- Please turn your cell phone **off** while in the building.
- Please no food or drink in the building.
- If you need a refill on your medication, please contact the pharmacy and allow 72 hours for the doctor to approve the refills. Please do not call after hours or on the weekends for refills.
- Referrals can take up to 7 business days. It is always advisable for you to call your insurance company to check on your benefits.
- We will call you with your results after your doctor reviews them. This may take up to one week. Some special tests may take longer.
- Records sent to outside physicians / Clinics are faxed as a courtesy. For Insurance, personal and legal purposes, there will be a \$25.00 fee for the first 10 pages, and .25 cents for each additional page plus current postage rate. These fees are due prior to forms being filled out.
- If there are Disability, FMLA or any other forms that require one of our physicians to fill out, due to the time to review and examine the patient chart, there is a \$35.00 charge for the first side of a form, then \$5.00 per side after. These fees are due prior to forms being filled out.
- There will be a \$50.00 charge for any letter written by one of our physicians. These fees are due prior to forms being filled out.
- If you are a scheduled for a procedure at **Desert Sun Surgery Center**, they have a cancellation policy that states "if you fail to cancel your appointment within 48 hours or no-show for your appointment there will be a \$100 charge".
- If we refer you to an outside facility for X-rays, Scans, MRI, or any other procedure, not performed by one of our physicians, please notify this office if you have not received a call from them within one week.
- Desert Sun Gastroenterology can use or disclose (release) your health information that identifies you for potential research studies. The health information may be used by and/or disclosed (released) to Desert Sun Clinical Research.
- Desert Sun is required by law to protect your health information. By signing this document, you authorize Desert Sun to use and/or disclose (release) your health information for research. Those persons who receive your health information may not be required by Federal privacy laws (such as the Privacy Rule) to protect it and may share your information with others without your permission, if permitted by laws governing them.
- I understand that at times, a CMA (certified medical assistant) working under the doctor's order may administer an injection.

Signature: _____ Date: _____