

Patient Name: _____
DOB: _____
MRN: _____

Center for Physical Therapy and Exercise

Please read and sign the areas below. Please let us know if you have any questions.

CONSENT FOR TREATMENT

I hereby authorize the therapy team at Center for Physical Therapy and Exercise to perform the treatments or procedures approved by my referring physician.

I acknowledge that no guarantees, either expressed or implied, have been made to me regarding the outcome of any treatments and/or procedures, I fully understand that it is impossible to make any guarantees regarding the outcome of any medical treatment or procedure.

(Authorized Signature)

(Date)

INSURANCE AUTHORIZATION FOR ASSIGNMENT OF BENEFITS/INFORMATION RELEASE:

I, the undersigned, authorize payment of medical benefits to Center for Physical Therapy and Exercise for any services furnished me by the provider. I understand that I am financially responsible for any amount not covered by my insurance. I authorize you to release to my insurance company or their agent information concerning health care, advice, treatment or supplies provided to me. This information will be used for the purpose of evaluating and administering claims of benefits.

(Authorized Signature)

(Date)

MEDICARE LIFETIME SIGNATURE ON FILE

I request that payment of authorized Medicare benefits be made on my behalf to Center for Physical Therapy and Exercise for any services furnished me by the provider. I authorize the release of medical information to the Centers for Medicare and Medicaid Services and its agent to determine the benefits payable for related services.

(Authorized Signature)

(Date)

ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES

I hereby acknowledge that I have received a copy of Center for Physical Therapy and Exercise Notice of Privacy practices. I further acknowledge that a copy of the current notice will be posted in the reception area and that I will be offered a copy of any amended Notice of Privacy Practices at my appointment.

(Authorized Signature)

(Date)