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Wading River, NY 11792
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Island Rheumatology
and Osteoporosis, PC

46 Little East Neck Road
Suite 2
Babylon, NY 11702
Ph: 631-539-0588
Islandrheumatology.com

Acknowledgement of Office Policies

(Effective January 1st, 2019)

Patient Name: _____ Date of Birth: _____

I certify that I have read, and or received a copy of the updated office policies either in person, via email, or on the website – www.islandrheumatology.com and fully understand the sections on on-time arrival policy, cancelling/missing appointments, co-payment/balance, special letters and form completion, fee for medical records, referral policies, ancillary services, phone messages, and medication refills. I further recognize that I will be offered a copy of any amended Notice of Privacy Practices at future appointments. If I have questions, I can contact the staff at Island Rheumatology and Osteoporosis, PC.

CANCELLING/MISSING APPOINTMENTS: Our office policy requires that patients must cancel their appointment at least 24 hours in advance. If you cancel or miss your appointment, you will be charged a \$40 fee. NO EXCEPTIONS.

Name of Patient /Legal Representative (specify relationship): _____

Signature of Patient /Legal Representative: _____ Date: _____