

Our patients are very important to us. To insure quality care please be aware of the following office policies:

Office hours: Mon. 7:30am-6:30pm, Tue-Thurs. 8:00am-5:00pm, Fri. 7:30am-5:00pm, and most Saturdays 8:00am -11:00am. The office reception area is usually staffed during lunch; however, medical personnel are not available at that time. We are closed on major holidays.

Appointments: Call to schedule your appointments. Provide your insurance card, photo ID, and medication list at each visit. If you are receiving allergy injections, you must bring your Allergy/Epinephrine Pen with you.

Family members that want to be seen at the time of another family member’s appointment will be charged for a separate appointment. They will be seen only if there is time available. If time is not available, family members will be asked to schedule an appointment.

Children under the age of 18 must be accompanied by a parent or legal guardian unless arrangements are made with us in advance.

Tardy/Cancellation/No-Show: Please call as soon as possible if you are not going to arrive on time for your appointment. Arriving 10 minutes late may result in the need to reschedule your appointment. If you fail to notify the office of cancelled appointments within 2 hours of the appointment time, then the appointment will be labeled “No Show”. Three “No Show” appointments within a 12 month period may result in termination from our practice.

Medication Refills: Ask your pharmacy to fax a refill request to Wamego Family Clinic at (785)456-8139 at least 72 business hours in advance. If you call the clinic, leave a message with the patient’s name, name of medication, dosage, specify 30 or 90 day supply, and name of pharmacy. Check with your pharmacy to see if your prescription has been sent.

Communication: Please discuss your questions and concerns with the nurse. If you receive the nurse’s voice mail, please leave your name, patient’s name, reason for calling, and a phone number. The nurse will communicate information to the providers and will return your call with their recommendations. If the voice mail is received after 4:30 p.m., your call may not be returned until the next business day. If you feel you must speak directly with your Provider, please make an appointment.

Payment: Insurance co-payments are due at the time of your visit. If you do not know what your co-pay is, we request a minimum of \$15 at the time of your visit. If you do not have insurance, we request payment at the time of your visit.

To help decrease the spread of germs, hand sanitizer and masks are available in our waiting room. Please feel free to use them during your visit. Thank you.

Signature	____/____/____ Date
Guardian Signature	____/____/____ Date
Relationship	