Women for Women

1302 Franklin Ave Suite 2200 Normal, IL 61761 (309) 888-9900 Fax (309) 888-9919 www.bnwomenforwomen.com

Patient Behavior Agreement

Patient Name: _____

Date of Birth: _____

This agreement is intended to facilitate a positive relationship between you and the staff. Physicians and staff must be treated respectfully to maintain therapeutic and productive relationships with our patients. Disruptive or threatening behavior is not acceptable from patients, family members, or other support persons.

Unacceptable behaviors identified below may lead to ending the patient physician relationship.

- Speech or conduct that is threatening, abusive, vulgar, discriminatory, or indecent
- Speech or conduct that interferes with, or presents a risk of interfering with, the provision of care to a patient
- Speech or conduct that causes or presents a risk of causing disruption or a threat to public safety on the premises
- Possession of firearms or illegal drugs
- Threats of violence or use of unlawful force
- Intentional damage to property or theft

I have read and understand the requirements of the Patient Behavior Agreement. In addition, I will treat the team members with dignity and respect while in the office setting, on the phone, and online.

Patient/Patient Guardian Signature

Date

A copy of the Behavior Agreement will be maintained in the Medical Record

8/9/2023