



## Policy for Divorced or Separated Parents

Pediatric Care, Inc. is dedicated to our patients and providing quality medical care to your child (ren). Children of divorced or separated parents sometimes present our practice with unique challenges; therefore the following policy has been established to avoid misunderstandings going forward.

**Please, read and agree to the following so that we may provide care to your child (ren).**

1. The providers and office staff will not be put in the middle of domestic issues or disagreements over the phone or in the office.
2. Please make decisions regarding appointments, vaccinating and/or any office procedures PRIOR to visiting our practice.
3. "Joint Custody" means that each parent has equal access to the child's medical records. Without a court order, we will not stop either parent from looking at their child's chart or obtaining test results. If there is a dispute between the parents regarding custody, and a custody agreement has been reached, we will need to see documentation specifying the legal guardian.
4. Only in situations where there is a confirmed, documented **Court Order** will one of the parent's be denied access to the minor child's health records or visits at the office. Pediatric Care, Inc. must have a copy of this Court Order on file in the minor child's electronic chart.
5. If there is NOT a court order on file with our office, either parent or legal guardian can sign a "Consent to Treat" form that authorizes any named individuals ( like grandparents, nannies etc.) to bring your child to our practice, be present during the visit and consent to any treatment during that visit. We will not be involved in any disputes regarding named individuals on the consent forms unless instructed by the court. Either parent or legal guardian can schedule an appointment for their child, be present for the visit and/or obtain a copy of the visit summary. (Subject to medical records fee.)
6. It is both parents' responsibility to communicate with each other about the patients' care, office visit dates and any other pertinent information relevant to the patient. It is not the responsibility of the provider to communicate visit information to each custodial parent separately. Our providers will not call the non-attending parent following visits. Additionally, we will **not** call a parent to notify of an appointment scheduled by the other.
7. The responsibility of the bill for minors is with the parents or legal guardian. It is our policy to collect payment at the time of service from the parent, guardian or caretaker who brings the child in for the appointment.
8. The parent or guardian who completes the information sheet and signs the assignment and release **will be the guarantor** regardless of insurance coverage.
9. We reserve the right to charge an administrative fee for copying records should the requests become excessive.
10. Should the issues that come between parents become disruptive to our organization or there is non-compliance with this policy, we reserve the right to discharge the family from the practice.

By signing this form, you agree to honor the above policy and understand that breaking this agreement may result in the discharge of your family from the practice.

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Name of Child(ren)

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Signature of Parent/Guardian

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Relationship to patient

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Date

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Signature of Parent/Guardian

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Relationship to patient

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Date