



COVID-19 Safety Policy and Patient Contract

We are making every effort to keep you safe and continue to provide the quality care that you need. Please read and sign off on our current policy and expectations regarding the Coronavirus.

Clinic Procedures:

- Masks will always be worn by all patients and staff in the office
- All surfaces, tools and equipment will be disinfected between patient uses
- Limited appointments to maintain social distancing and a safe amount of people in the clinic
- Staff and Therapists are following all safety precautions inside and outside of the clinic
- No staff member will come to the clinic feeling ill. If not feeling well, they will get tested with suspicion of exposure and will promptly notify all patients if there are any issues.

We expect that you will notify us and NOT COME TO THE CLINIC if:

- You or someone in your household is experiencing symptoms of COVID-19: cough, fever, sore throat, headache, shortness of breath, loss of taste or smell
- You or someone in your household has been tested for COVID-19, but does not have results yet
- You or someone in your household has tested positive for COVID-19 in the last 10 days
- You have been informed of direct contact with someone else who has COVID and have not been tested yourself

**Our fee will be waived for illness related cancellations*

We also expect you to notify us of the following conditions:

- You have travelled recently or have upcoming travel
- You have participated in a large group gathering (party, wedding, event)
- Any other circumstance that you may have been exposed, but do not feel compelled to get tested

**We will decide together if it is appropriate for you to come to the clinic or if you should wait*

We are taking the virus and the health and safety of you, our employees, and our families very seriously. We ask that you follow all reasonable guidance and precautions outside of the clinic as well as inside.

Patient signature: _____ Date: _____

Printed patient or guardian name: _____