



# PHYSICAL THERAPY, PLC

## Patient or Guardian Agreement

**CONSENT TO TREATMENT:** I consent to receive outpatient rehabilitation therapy services and any ancillary services that are deemed medically necessary or appropriate by my physical therapist and/or treating physician. However, I am aware that the practice of rehabilitation therapy is not an exact discipline and I acknowledge that no guarantees have been made to me regarding treatment and the treatment results from the rehabilitation therapy.

Signature of Patient or Guardian: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

In conjunction with my care, I consent to allow the use of filming devices, such as a camera or cell phone, for the purposes of enhancing my care. In addition, I consent to the transmittal of such filming device images or video to RX Physical Therapy and/or the treating physician through email or text. I acknowledge that such film and related images will only be used or disclosed for treatment purposes, and that RX Physical Therapy will not further use or disclose such film or images for any other purpose without my authorization or consent

Yes  No

**Financial Responsibility:** I acknowledge that RX Physical therapy may disclose protected health information for the purposes of payment, treatment and healthcare operations (please refer to RX Physical Therapy's Notice of Privacy Practices for additional information). I understand that I am responsible for any balance due and owing RX Physical Therapy for services rendered. I agree to pay RX Physical Therapy all amounts that are due and owing for services provided which are not otherwise paid for by Medicare, a third party insurance plan, a third party payor, or other payor source on my behalf for services rendered. In the event that this account is referred to a collection agency or an attorney, the undersigned further agrees to pay all reasonable costs of collection including, but not limited to, reasonable attorney's fees.

Signature of Patient or Guardian: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_