



COMPREHENSIVE  
Pain Management Center

Annu H. Navani, M.D., Q.M.E.  
*Board Certified in Pain Management & Anesthesia*  
Ph: 408.356.5292  
Fax: 408.356.5307

## Patient Rules & Regulations for Comprehensive Pain Management Center CPMC Copy

Our goal at Comprehensive Pain Management Center (CPMC) is to provide top quality care to our patients in a compassionate and professional environment. We do our best to stay on time with our schedule and give you our undivided attention.

As a patient of the CPMC, we appreciate you following the rules and regulations of the practice which help us maintain our goals.

1. If you are unable to keep an appointment, kindly call our office at least 24 hours prior to your appointment. We can then reschedule your appointment to a more convenient time.
2. A \$25 fee will be applied to all appointments not canceled within the 24 hour period or if you fail to keep your appointment.
3. Please arrive 15 minutes prior to your appointment time. It is important to have your questionnaire and registration forms completed. If the forms are not complete at the time of your appointment, or you are more than 5 minutes late, you may need to be rescheduled for a later date.
4. Cash payments and co-pays must be paid at the time of check in.
5. We do not accept checks for the initial consultation.
6. If you have recently moved, had a change to your insurance, claims adjustor, attorney, primary treating physician information, or had any other change to your personal information, please supply us with the new information. Please provide the new information within 10 days of the change so we can keep up-to-date records.

**Phone:** 408.356.5292

**Fax:** 408.356.5307

**Mail:** 2505 Samaritan Drive, Suite 601, San Jose, CA 95124.

7. You are responsible for knowing the coverage & benefits of your particular insurance company. If you are not sure of the requirements of your insurance company, please check with them prior to obtaining medical services. Please remember that insurance is considered a method of reimbursing the patient for fees paid to the doctor and is not a substitute for payment. Some companies pay fixed allowances for certain procedures, and others pay a percentage of the charge. It is your responsibility to pay any deductible amount, co-insurance, or any other balance not paid for by your insurance.

Print Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Witnessed: \_\_\_\_\_ Date: \_\_\_\_\_



COMPREHENSIVE  
Pain Management Center

Annu H. Navani, M.D., Q.M.E.  
*Board Certified in Pain Management & Anesthesia*  
Ph: 408.356.5292  
Fax: 408.356.5307

---

## Patient Rules & Regulations for Comprehensive Pain Management Center Patient Copy

Our goal at Comprehensive Pain Management Center (CPMC) is to provide top quality care to our patients in a compassionate and professional environment. We do our best to stay on time with our schedule and give you our undivided attention.

As a patient of the CPMC, we appreciate you following the rules and regulations of the practice which help us maintain our goals.

1. If you are unable to keep an appointment, kindly call our office at least 24 hours prior to your appointment. We can then reschedule your appointment to a more convenient time.
2. A \$25 fee will be applied to all appointments not canceled within the 24 hour period or if you fail to keep your appointment.
3. Please arrive 15 minutes prior to your appointment time. It is important to have your questionnaire and registration forms completed. If the forms are not complete at the time of your appointment, or you are more than 5 minutes late, you may need to be rescheduled for a later date.
4. Cash payments and co-pays must be paid at the time of check in.
5. We do not accept checks for the initial consultation.
6. If you have recently moved, had a change to your insurance, claims adjustor, attorney, primary treating physician information, or had any other change to your personal information, please supply us with the new information. Please provide the new information within 10 days of the change so we can keep up-to-date records.

**Phone:** 408.356.5292

**Fax:** 408.356.5307

**Mail:** 2505 Samaritan Drive, Suite 601, San Jose, CA 95124.

7. You are responsible for knowing the coverage & benefits of your particular insurance company. If you are not sure of the requirements of your insurance company, please check with them prior to obtaining medical services. Please remember that insurance is considered a method of reimbursing the patient for fees paid to the doctor and is not a substitute for payment. Some companies pay fixed allowances for certain procedures, and others pay a percentage of the charge. It is your responsibility to pay any deductible amount, co-insurance, or any other balance not paid for by your insurance.