

McLaren Print System Order

Order No: 54956 Reprint Previous Order No: 11510
Order Date: 2020-06-25
User: Katie Jacobs
Phone: 9893457000

Ship Location: Evergreen Clinic-Erin Deland
611 Court Street Clinic
West Branch, MI 48661

Forms

Quantity: 500
Paragon Dept No: 69680
Dept Name: McLaren
Company Number: 810

Order Total Price: 0.00

Item Number: MM-31-N
Item Description: Patient Centered Medical Home Neighborhood (PCMH-N) Patient and Physician Agreement
Revision Date: 8/2015
Print: 1 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish:
Drill:
Misc Info:



**Patient Centered Medical Home
Neighborhood (PCMH-N)
Patient and Physician Agreement**

I have received the Patient Centered Medical Home-
Neighborhood handout describing this model of care, what I
can expect from my physicians, and what is expected of me.

My physician has discussed the details of PCMH-N with me
and has answered all of my questions.

Patient Signature Date _____

Printed Patient Name Birth Date _____

Parent/ Guardian Date _____

Physician Signature Date _____

Printed Physician Name