

McLaren Flint
Flint, MI

**SURGERY AND ENDOSCOPY CENTER
PAIN CLINIC**

PAIN CLINIC DISMISSAL NOTIFICATION

(Date) _____

Dear _____,

Due to the fact that you violated the Pain Management Contract by _____, I regret to inform you that you will need to seek a new physician or clinic as the custodian of your pain management needs as McLaren Flint SEC Pain Program nor I will no longer be able to provide you with further care as a result of your breach of contract signed on - _____.

I recommend that you contact your primary care physician or referring physician as soon as possible to arrange for them to provide you with medication until you can locate another pain management specialist.

The clinic will forward a copy of your medical records to your new physician upon receiving proper documentation from them.

Sincerely,

Type the Physician name here

CC: *Referring physician or primary care physician*

Reasons can be:

1. Non compliance with medication
2. Excessively missing appointments
3. Multiple physicians writing narcotic prescriptions
4. Lab tests show the presence of medications / drugs that shouldn't be there
5. Trading, selling, or misuse of the narcotics

