

**McLaren Print System Order**

**Order No:** 83719 Reprint Previous Order No: 11510  
**Order Date:** 2024-03-11  
**User:** Jodie Bolzman  
**Phone:** 989-977-2118

**Ship Location:** McLaren Bay Pulmonary Medicine Attn: Jodie  
714 S. Trumbull St. Ste. 200  
Bay City, MI 48708

**Forms**

**Quantity:** 100  
**Paragon Dept No:** 56080  
**Dept Name:** Jodie Bolzman  
**Company Number:** 810

**Order Total Price:** 3.35

**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

MS-PH-0110