

RCC Patient Conduct Policy

At RCC, we are committed to creating a welcoming and respectful environment for all patients, visitors, and staff. We believe in delivering excellent care in a space that is safe, professional, and compassionate.



To support this mission, we ask that everyone in our practice—patients, visitors, and staff—treat each other with courtesy and respect at all times. Aggressive or disruptive behavior of any kind will not be tolerated. **Respectful communication includes both in-person and phone interactions. The practice reserves the right to discharge and refer care to an outside facility all individuals who choose not to honor this policy.**

Expectations for Behavior

To ensure a positive experience for everyone, we ask that you:

- Speak to staff and other patients respectfully.
- Refrain from using profanity, intimidation, or any form of harassment.
- Silence and store your phone during interactions with staff or providers.
- Supervise children at all times while in our office.
- Discuss all topics you wish to cover with the doctor when scheduling your appointment, so we can allow enough time. If not planned in advance, an additional visit may be needed.

If you have concerns about your care or service, please speak with a manager before leaving the office so we can assist you promptly.

Billing-related questions that remain unresolved can be addressed by the Billing Office Manager.

Zero-Tolerance Policy

The following behaviors are strictly prohibited in person and/or on the phone and may result in removal from the facility or discharge from our practice:

- Use of threatening, intimidating, or abusive language—including racial or cultural slurs.
- Threats of violence in any form (verbal, written, electronic).
- Physical assault or threats to harm others or property.
- Possession of weapons of any kind.
- Destruction or damage to RCC property.
- Menacing gestures or verbal intimidation.

If you experience or witness any inappropriate behavior, please report it to a staff member immediately. Thank you for helping us maintain a safe, respectful, and caring environment for all.

Patient Name: _____

DOB: _____

Signature: _____

Date: _____