



# Expectation of Professional Patient Conduct

Cucamonga Valley Medical Group (CVMG) is a family practice and as such strives to ensure a safe, family-friendly environment. Above and beyond that, our staff and providers aim to live by our Core Culture, of which the main tenets are Life, Love, and Compassion. In order to foster that, we have carefully developed this policy.

We understand that it can be stressful for patients when there are long waits, if you are feeling unwell, or encountering a multitude of other life circumstances, but we have a zero tolerance policy towards aggressive behavior and rudeness to our staff. We expect that you treat our staff, fellow patients, caregivers, and visitors politely and with respect. Violence or verbal harassment will not be tolerated or accepted under any circumstances. You may be asked to seek care at another primary care practice if this behavior occurs.

**Types of behavior that are unacceptable include, but are not limited to:**

Physical Assault	Negative, Spiteful,	Acting or appearing to be under the
Offensive Language	and Stereotypical Comments	influence of any substance that impairs
Verbal Abuse	Wielding of Objects/ Weapons	judgment
Swearing	Attempting Physical Abuse -	Bullying, Victimization, and Intimidation
Shouting and Intrusive Behavior	Threats of Injury	Stalking- 'lhreatening Behavior
Abusive Remarks	Offensive Gestures	Towards Staff and/or Their Family
Invasion of Personal Space	Damage to the Property	Members Outside of the Workplace

If you are considered to have breached this policy, one or more of the following may occur depending on the circumstances:

Discussion of behavior with Management	Discharged from our practice's care Reported to the Police	Removal from the Practice
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A good patient - doctor relationship, based on mutual respect and trust, is the cornerstone of good patient care. The removal of patients from our practices is an exceptional and rare event and is a last resort in an impaired patient - practice relationship. When trust has been irreversibly broken, it is in the patients best interest to find a new practice and we will facilitate this to our best ability (with the exception of violence, in which case the correct law enforcement authority will be requested to intervene).

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PRINT PATIENT NAME

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DOB:

\_\_\_\_\_  
SIGNATURE OF PATIENT (IF PATIENT IS A MINOR, SIGNATURE OF GUARDIAN)

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Date: