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Information for Patients of Dr. Garrard

Thank you for choosing me as your primary care physician. The following is information on how I run my practice and what we should expect from each other. Ultimately, the most important thing in the patient-physician relationship is for you to be comfortable with me as your primary care physician.

I provide primary care for all ages, from newborns to elderly and have additional training in sports medicine. I manage most chronic medical problems and most acute problems of any type can be handled in the office without referral. My patients who require hospitalization, will be admitted and attended to by a hospital physician. We perform x-rays, blood work, dermatologic procedures and care here in the office.

I strive to see all established patients with urgent problems as soon as possible, this can usually be done on the same day or at the very least within 24 hours.

For any appointment, plan on being in the office for **one hour**. Most of the time you will be out sooner, but occasionally it may take longer. When I'm running behind there will always be a good reason. Most commonly: **1)** a very sick patient presented for a routine visit, **2)** a patient scheduled an office visit for one problem, but once in the office had multiple complaints, **3)** a patient scheduled earlier in the day was late for their appointment.

Personal Policies for my patients:

- 1) As long as you have sound judgment, you are ultimately responsible for your healthcare. You need to know any medical problems you have, what medicines you are on, how many refills you have and to get refills during office visits.
- 2) Be on time. Being 15 minutes late to your office visit may result in either being rescheduled later in the day or for a different day. Even being 5-10 minutes late can really back up the schedule and cause patients scheduled after you to be seen late. Have the office number on your cell phone and call if you are running behind in case we need to reschedule for a different time.
- 3) You will have to find another primary care physician for any inappropriate remarks or actions toward myself or my staff, or excessively not showing up for appointments.
- 4) Only **1-2** new problems can generally be addressed in one office visit.
- 5) If you schedule a same day urgent/sick visit, the urgent problem will be addressed; any additional problems will need to be rescheduled for another appointment.
- 6) If you are scheduled for a routine appointment (such as to review high blood pressure or depression), but wish to address a completely new problem (or problems) while at this visit, please **let my nurse know**. If the new problem(s) requires a lot of time to address, we may have to reschedule your routine appointment for a later date.
- 7) I do not refer out for problems that I have not evaluated in clinic.
- 8) Patients with high blood pressure need to monitor at home and bring in a log.
- 9) If you have blood work, but no scheduled office visit to review your blood work, my nurse will call if there are **abnormal lab findings that need to be addressed**.

- 10) If you are sent out of the office for any testing, it may take up to one week for the results to be available. If you have not heard from me or my nurse by then, please call to make sure we have been sent the results.
- 11) If you are on a chronic medication, you will need to come in periodically to review the effects and/or side effects.
- 12) I do not do chronic pain management and will refer to an appropriate specialist.
- 13) I personally do not prescribe weight loss medicine and general do not prescribe controlled substances or potentially addictive medicine (such as pain, anxiety or sleep medicines). In the rare event that a controlled substance is prescribed, it will usually be for a short course only. In the event that these types of medicines are needed long-term, I will refer you appropriately.
- 14) Most acute upper respiratory infections (cough, congestion, sinusitis, bronchitis, common cold, the “crud”) are viral infections and allowing the virus to run its course is the only true treatment. Medicines used to treat the symptoms of a virus are available over the counter, but none have been shown to be much better than placebo. If you have chronic lung disease, or if there is extreme sore throat, true fever (100.5°), chest pain or shortness of breath, then schedule an office visit. Otherwise, it is advisable to wait at least **one week** and if not improving schedule an office visit. I do not prescribe antibiotics or do steroid shots for viral infections. I also do not prescribe antibiotics to try and prevent a viral infection from turning into a bacterial infection, unless you have chronic lung disease.
- 15) I regularly have medical students and/or resident doctors in the office as part of their training. Teaching is one of the most important things I do as a physician. There may be times a student or resident doctor is with me during your office visit or may even evaluate you first (especially orthopedic injuries). In the case that your office visit involves a sensitive subject matter, such as depression or a full physical exam, I will not bring them in with me or have them evaluate you. If you have any concerns with any other type of office visit, just let my nurse know and I’ll come in alone.

Phone Calls to the Office

A full-time primary care provider cares for roughly 1,500 patients. As you can imagine, at times phone calls can spread myself and the staff thin and really slow down clinic. Patients calling in to the office with questions and requests are a normal part of practicing medicine, but I strive for my patients to keep them to a minimum. There are a couple of things you can do to help the clinic as a whole:

Calling to request prescriptions to be phoned in to your pharmacy is the number one avoidable phone call we get. Sometimes this is unavoidable, in which case always feel free to call the office. However, keeping up with your medicines and having them refilled at your regularly scheduled appointment will keep you from having to call in to the office. I expect you to **bring in your medicines or a list** to your scheduled office visits for us to review. As an example, if you have a high blood pressure office visit every 6 months, then you need to make sure you receive a 6-month prescription at your office visit.

Another avoidable call is calling in for a problem to be treated over the phone. Practicing medicine in this fashion is not only time consuming, but also inappropriate and potentially very dangerous. Even problems that may appear as benign as acute cough or poison ivy need to be evaluated in the office.