

Family Health Center of Plainfield, LTD

WEIGHT LOSS AGREEMENT

An Electrocardiogram (EKG) will be required for every weight loss patient at their first visit before being prescribed any weight loss medication. The charge is \$60.00, one time fee.

Weight loss visits are self pay with a charge of \$75.00 for every visit. A monthly visit is necessary for refills on weight loss medications.

I, _____, am aware that the weight loss plan is considered a self pay visit of \$75.00, which is due at the time of service.

Signature

Today's Date