

Instructions for Annual Physical

1. Be sure your insurance covers an annual physical exam.
 2. You will be required to give a blood, urine, and in some cases a stool sample 1-2 weeks before your exam.
 3. **You must be fasting 10 to 12 hours before the labs can be collected.** Fasting is defined as having nothing to eat or drink with the exception of water. The labs will be collected at our clinic or at the lab designated by your insurance.
 - An appointment is not necessary to have your labs collected at either our clinic or the designated lab. Simply come in at your convenience during the specified facility's operational hours.
 - Be sure to drink plenty of water the morning your labs are collected.
 4. Schedule your physical with the doctor to take place 1 week after your lab work is collected. This allows sufficient time for the labs to be processed and the results to be sent to our office.
 - When scheduling, please inform the front desk your appointment is for a physical exam and that your labs have been collected.
 5. We will not call you with your lab results; it is our policy that the doctor will discuss your lab results with you in person during your physical exam.
- The Labs will screen for the following:
 - Anemia
 - Infection
 - Diabetes
 - Liver and kidney disease
 - Thyroid disease
 - Cholesterol
 - In some cases, colon and prostate cancer
 - The physical will take approximately 1 hour.
 - Other tests such as an EKG, chest x-ray, or lung spirometry may be performed the day of the physical, if deemed necessary by the doctor.
 - Medical problems cannot be addressed and prescriptions cannot be refilled the day of your physical exam. Physicals are considered "well visits," because of this your insurance will not cover treatment for medical problems on the same day of your physical.
 - For female patients, pap smears must be scheduled separately from physicals due to insurance specifications.
- If you have to cancel your physical, please cancel more than 24 hours in advance. If notification is not received a penalty fee may apply.

Please sign below that you have read and understand these instructions for your annual physical.

Signature

Date

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