

Patient Behavior Contract

This **Patient Behavior Contract** ("**Contract**") is entered into on _____ ("**Effective Date**") between the following parties:

Provider

Patient

The Provider and the Patient may be referred to individually as a "**Party**" and collectively as the "**Parties.**"

1. Purpose

The purpose of this Contract is to establish clear expectations regarding the Patient's conduct while receiving services from the Provider. This Contract is intended to promote a safe, respectful, and effective healthcare environment for patients, staff, and visitors.

2. Scope

This Contract applies to all interactions between the Patient and the Provider, including but not limited to in-person visits, communications, treatment sessions, and use of Provider facilities or services.

3. Standards of Patient Conduct

The Patient agrees to adhere to the following standards of behavior:

- Treat all staff, healthcare professionals, and other patients with respect and courtesy
- Communicate in a cooperative and non-disruptive manner
- Follow reasonable instructions related to care, safety, and facility rules
- Refrain from any form of verbal abuse, threats, harassment, or discriminatory behavior
- Avoid physical aggression or any conduct that could endanger others
- Respect appointment schedules and provide reasonable notice for cancellations
- Comply with applicable health, safety, and administrative policies of the Provider

4. Prohibited Conduct

The following behaviors are strictly prohibited:

- Use of offensive, abusive, or threatening language
- Physical violence or intimidation
- Possession or use of illegal substances on Provider premises
- Damage to property or interference with medical equipment
- Repeated failure to comply with agreed treatment plans without reasonable cause

5. Provider Responsibilities

The Provider agrees to:

- Deliver healthcare services in a professional and respectful manner
- Maintain a safe and supportive environment
- Provide clear information regarding treatment plans, policies, and expectations
- Address concerns or complaints raised by the Patient in a timely manner

6. Communication and Conflict Resolution

If concerns arise regarding behavior or interactions:

- The Parties agree to address the issue through direct and respectful communication
- The Provider may issue a written warning outlining specific concerns and required corrective actions
- The Patient will be given a reasonable opportunity to respond and improve conduct

7. Breach of Contract

Failure by the Patient to comply with the terms of this Contract may result in:

- Formal written warnings
- Restrictions on non-essential services
- Referral to alternative care providers where appropriate
- Termination of the Provider-Patient relationship, subject to applicable professional and ethical obligations

The Provider will take reasonable steps to ensure continuity of care where termination is necessary.

8. Term and Review

This Contract becomes effective on the Effective Date and remains in effect for the duration of the Patient's engagement with the Provider, unless terminated earlier in accordance with the Termination clause.

The Provider may review and update this Contract periodically. Any material changes will be communicated to the Patient.

9. Termination

Either Party may terminate this Contract:

- By mutual written agreement; or
- By the Provider, upon material breach by the Patient, following reasonable notice where appropriate

Termination of this Contract may also result in discontinuation of services, subject to applicable care obligations.

10. Acknowledgment

By signing this Contract, the Patient acknowledges that they have read, understood, and agree to comply with the expectations outlined herein. The Patient further acknowledges that failure to meet these expectations may affect their ability to continue receiving services from the Provider.

11. Governing Law

This Contract shall be governed by and interpreted in accordance with the laws of _____, without regard to conflict of law principles.

Signatures

Provider

Name

Date

Signature

Patient

Name

Date

Signature



This document is a PDF copy of **Patient Behavior Contract** template. You can edit it with **Jotform Sign** and convert to an eSign document with **Jotform Sign**.



Learn More About Jotform PDF Products

Jotform offers powerful PDF solutions. Check them out below.

Jotform PDF Editor

Turn form submissions into PDFs automatically ready to download or save for your records.

jotform.com/products/pdf-editor/



Smart PDF Forms

Convert your PDF files into online forms that are easy to fill out on any device.

jotform.com/products/smart-pdf-forms/



Jotform Sign

Collect e-signatures with Jotform Sign to automate your signing process.

jotform.com/products/sign/



These templates are suggested forms only. If you're using a form as a contract, or to gather personal (or personal health) info, or for some other purpose with legal implications, we recommend that you do your homework to ensure you are complying with applicable laws and that you consult an attorney before relying on any particular form.