

**ALBUQUERQUE ALTERNATIVE HEALTH  
DR. ADAM V. DOWNS**

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**OFFICE AGREEMENTS**

Welcome to Albuquerque Alternative Health. Our mission at Albuquerque Alternative Health is to serve you by providing the education and chiropractic care necessary to optimize the function of your nervous system and correct your spine. We respect you and your time; in return, we ask that you follow the policies below.

**Children/family**

The effects of subluxation are serious and powerful; therefore, we recommend family subluxation check-ups for all children and spouses. These check-ups are offered at our expense and must be scheduled within the next two weeks to take advantage of this opportunity. (\$100.00 value for each person we check)

**Appointment Times:**

Adjustments will be given during adjustment times **ONLY**. **(Please do not be more than 15 minutes early or late.)** If you do not make your scheduled appointment time, we will contact you within 15 minutes of your missed appointment. All missed appointments must be made up as soon as possible. Please call if you know you're not going to make it and reschedule for a different treatment time.

**Text Message Reminders:**

For notification of office closings and changes in schedules.

**Hour to Health:**

Every other Tuesday at 5:30 the Doctor provides an opportunity to enhance your understanding of chiropractic and wellness. All new patients are required to attend four workshops within the first year of care, the first of which will be in the first month of care. Guests are welcome to attend.

**Perfume:**

We ask that you please **DO NOT WEAR PERFUME** when coming to our office. We have a few patients that are extremely allergic to perfumes and it affects them in a very bad way. If you would please be so kind to have this in mind before coming to our office. Thank you

**Healing:**

Remember that healing and spinal correction takes time. If at any time during your care you do not feel that you're responding as well as you expect, please discuss it immediately with the Doctor. We want you to get the most from your chiropractic care.

**Adjusting/Consultation:**

Adjustment times are for adjustments and healing. If you have questions to address to the Doctor, please make an appointment at the front desk.

**Phone:**

Our office is a place for healing, please leave all cell phones/noise making devices in your car or put them on "**silent**" mode. Please refrain from making phone calls in the office.

Please do not ask to use our phone unless it is an emergency, our phone is for office use only.

**Food or Drink:**

**Please do not bring drinks or food into the office.**

**I have read and understand the policies and do agree to the policies:**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_