

ANTHONY MEDICAL & CHIROPRACTIC

Manual Therapist Employment Expectations

Manual Therapists play a vital role in the healing services we provide our patients at Anthony Medical and Chiropractic (AMC). AMC is a healthcare organization continuously striving to provide exceptional care to patients commonly experiencing acute and/or chronic pain. Based on these factors, there are several basic expectations we have of our manual therapists. Please review, initial, and sign this document to confirm your understanding of our employment expectations.

1. _____ (print name) understands that, under the Health Insurance Portability & Accountability Act of 1996 (“HIPAA”), patients have certain rights to privacy regarding their protected health information. I understand that any information, whether patient or company, is confidential. I further understand that I am not authorized to communicate about any patient or company information unless it is pertinent to the successful performance of my duties and assigned tasks at Anthony Medical & Chiropractic and in a manner that safeguards protected health information. _____ (initial)
2. As stated during my screening interview, I am available to work designated shifts that will be during the hours of operation discussed which are: Monday – Friday 8am – 7pm & Saturday from 9am – 4pm. _____ (initial)
3. I am willing to work a minimum of two afternoon shifts (2pm-7pm) weekly, alternating Saturdays (9am-4pm), and one on-call shift weekly. _____ (initial)
4. I have reliable transportation available to fulfill my commitment for employment if offered a position with Anthony Medical & Chiropractic. _____ (initial)
5. I have reliable communication support such as a phone, texting options, and an active email to communicate with the company and will respond promptly to communications received from the company. _____ (initial)
6. I will adhere to the dress code policy while working, including times at outside events. _____ (initial)
7. I will participate in completing laundry between appointments and during open times. _____ (initial)
8. If hired, I understand if I have (2) unexcused absences during my 90-day probationary period or I have (3) unexcused tardy events, my employment may be terminated. _____ (initial)
9. I do not have any additional commitments or obligations that would keep me from fulfilling these minimum requirements for employment with Anthony Medical & Chiropractic. _____ (initial)
10. If applicable to your position, you may be required to assist with clinical coverage in the following manner: (a) Temple office / Killeen office (b) Waco office / North Waco office _____ (initial)

If you have questions, please take a moment to discuss them with your interviewer/designated person. By signing below, you have had your questions answered satisfactorily as well as have an understanding of the minimum qualifications and company expectations.

Print Name

Date

Signature