



Brian Buggie, MD • 445 West 23rd Street, Suite 1EE • NYC 10011 • 646-580-8839

Communication Guidelines

Patient's Name: _____

1. I agree to only call and/or email between 8 am and 10 pm Monday through Saturday. Phone conversations will be limited to less than 10 minutes.
2. In the event of a real emergency, I will go to the nearest hospital or call 911 for assistance. Once I am getting assistance, I will notify Dr. Buggie by leaving a voicemail rather than sending an email.
3. I understand that voicemail is checked once every 24 hours Monday through Saturday. Voicemail and email are not checked on Sunday.
4. I will use email for concise communication of administrative issues such as rescheduling an appointment.
5. I will not text Dr. Buggie.
6. If I need to express lengthy thoughts or raise issues in written form, I understand that Dr. Buggie will print the email and it will be discussed in our next session. I will also bring a copy of the email to our session. Dr. Buggie does not respond to therapeutic content in writing, as it does not serve the therapeutic process responsibly.
7. I will not include Dr. Buggie in mass emails.
8. I agree that I will cancel appointments 48 hours in advance or I agree to pay for the missed appointment.

I have read and agree to these communication guidelines.

Patient's signature: _____

Date signed: _____