

**PLEASE read the following important information regarding your physician appointment at our clinic:**

- **Initial Appointment** : Please **arrive 15 minutes early** to allot time to check in and complete the registration process. The checked boxes below indicate what you will need to bring to your first appointment:
  - On our website you will find a **medical history questionnaire**. Please bring this questionnaire **completed** to your upcoming appointment. This will save time at the point of registration and help to get you in for your appointment on time.
  - Please plan ahead, as you must bring any **medical records**, diagnostic tests with the reports (i.e. MRI's, CT scans, X-Rays, Nerve Conduction/EMG studies, laboratory tests, and sleep studies) and/or previous office notes **RELATED TO YOUR VISIT** to the center. Be aware that you may need to sign release forms to obtain your medical records and will most likely need to pick up a diagnostic test/report from the place at which they were performed. It is your responsibility to obtain your medical information because we cannot treat you appropriately without it.
  - Please bring your **health insurance card** and **picture identification**. If your insurance requires that you have a referral from your Primary Care Physician (PCP) to see a specialist, please obtain this. You may call us with this information before the visit (extension 4266) or have your PCP fax it to us at 508-872-1205. Please be aware that it may take some time for your PCP to process your referral request. If you have any questions regarding your insurance plan, you should contact your insurance provider, although we are happy to answer any questions that may come up.
  - A reminder: If your insurance requires **co-payments**, they are due at the time of each service. We accept check and credit card payments.
- **Additional insurance information:**
  - If you choose to receive care without the necessary referrals or authorizations from your insurance, you will assume responsibility for payment. If services are not covered and you still desire them, you may opt to self-pay for each visit.
  - Please alert us if your **insurance changes** during your course of treatment.
  - Please be aware that when seeing a physician, your insurance will be billed for the physician **professional** service as well a Spaulding **technical** charge for physician practice support costs.
  - If you have questions about your bills, please call our **Spaulding Billing Customer Service**  
**Line: (617) 726-3884.**
- **24 Hour Cancellation Policy:** We are a busy practice and appointments are at a premium. Please provide at least **24 hour notice for cancellations** so we can notify patients on our wait list. Please be aware that multiple cancellations can affect your recovery, can jeopardize your insurance coverage, and **may result** in discharge from our service.

