

ORTHOPAEDIC ASSOCIATES OF OSCEOLA

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To Our New Patient,

We would like to take this opportunity to welcome you to our practice, and thank you for choosing Orthopaedic Associates of Osceola.

Please complete the enclosed paperwork before coming to your appointment. This will allow you the time to think about each question and answer it thoroughly. Also be aware that we will need you to complete all paperwork annually. As you complete these forms, you may think of questions that you would like to ask your physician. Write down these questions and bring them with you to your appointment. **Please arrive to your first appointment at least 15 minutes before your scheduled appointment time so that we have time to process your new patient paperwork, and have your photo ID and insurance cards available so that they can be scanned.**

You **must** bring any xrays, CT scan, MRI (the actual films or cd), and any medical records that pertain to the reason you are seeing the physician to your appointment. **If you do not bring these at the time of your visit you will have to reschedule your appointment.**

If you have an HMO insurance plan, please bring the appropriate referral from your primary care physician. A written script from your primary care physician that says "Refer to Ortho" may not be an appropriate referral, verify with your insurance company. We are required by your insurance company to have this referral for your records. **If we do not have the appropriate referral for your visit you will have to reschedule your appointment until we have the referral needed for us to bill your insurance company.**

If you would like a copy of your office note sent to another physician, please provide their name, address, and phone/fax number.

Please remember to list all medications you are taking whether they are prescribed or over the counter and provide your preferred pharmacy address and phone number.

If this appointment is for a minor, a parent or legal guardian must be present for the initial visit. All other visits must have a signed consent from the parent or legal guardian.

Thank you again for allowing us to participate in your care. We look forward to meeting you.