



Everett Location
 3131 Nassau Ste 101
 Everett, WA 98201
 Ph: 425-339-8888
 Fax: 425-258-6933

Smokey Point Location
 17432 Smokey Pt. BLVD. Ste 103
 Arlington, WA 98223
 Ph: 360-653-2326
 Fax: 360-658-8944

Dear Patient,

Welcome to Ankle & Foot Clinics Northwest, **Everett and Smokey Point Locations.** To make your upcoming visit go smoothly, please review the following:

Please complete and sign all of the enclosed Registration forms and bring them with you to your first appointment along with your **1) Insurance card(s), 2) Driver’s License and 3) Current Medication List to Include Vitamins and Supplements (names & dosages).**

If you have previous X-rays, MRI’s, CT Scans or other tests relating to your visit please have them sent to us ahead of time or bring them with you. You will also need to pay any applicable specialist co-payments at check in for your visit.

New Patients: Please plan on arriving at the clinic at least 30 minutes before your appointment time so we may have time to enter your information into the computer and the medical assistant may review your history with you before your appointment with the doctor. This is necessary so the doctor will have enough time for a complete and thorough exam.

Please review your **insurance card** and contact the insurance company’s customer service department if needed to inquire if your plan requires a referral from your primary care provider before seeing our physicians.

We have included both a copy of ‘Summary of Notice of Privacy Practices’ and the detailed version of the HIPAA Notice of Privacy Practices for your reading pleasure.

Managed Care Plans

Please contact your primary care physician to obtain a referral before your scheduled appointment. Your referral **must** arrive in our office before your scheduled appointment time via mail or fax. Our fax number is **425-258-6933**. If the referral is not received before your scheduled appointment time, your appointment most likely will have to be rescheduled. It is always best for you to make sure that your primary care physician has sent the written referral authorizing your visit before you come in.

If you request treatment to be rendered without the authorized referral, payment is due at the time of service and is not billable to your insurance company. You will be asked to sign a waiver of liability for the appointment prior to being seen.

Most insurance plans also require an insurance co-payment that is to be paid at the time of service. If your insurance is one that requires a co-payment, please pay this upon checking in with the receptionist for your appointment. Should you have any questions or concerns about our office policy on this matter, please ask to speak with our office manager.

We look forward to welcoming you as a patient to the offices of Ankle & Foot Clinics Northwest.

Do you have your completed and signed forms:

- Patient Registration
- Medical Health History
- Billing and Credit Policy
- Acknowledgement of Receipt of Privacy Practices
- Authorization to treat a minor (if applicable)
- Consent for Leaving Messages
- Cancellation Policy
- Insurance Card
- Drivers License
- Medication List

See MAP
(on reverse side)