

Dear Patient,

Enclosed in the packet of information provided to you is a comprehensive **Personal Information Form** that should be completed **before** your arrival to our office. It is essential that you answer every question that is asked, including specific details of your past and current medical problems, pertinent dates, medications and dosages. This important information allows us to provide you with better care and assist you in securing any insurance benefits that you may be entitled to receive.

Medical identity theft is the fastest growing form of identity theft. Due to newly enacted federal regulations, we will be validating your identity upon check-in at our office. **Please make sure to bring your driver's license or other government issued photo ID and Insurance card(s) with you to your appointment.** Failure to do so may result in a delay of service or re-scheduling of your appointment. We apologize for any inconvenience that this may cause. However, it is for your protection.

Unfortunately, medical emergencies do arise, often making our schedule somewhat unpredictable. In the event that your appointment is delayed or rescheduled, we apologize. We recognize that your time is valuable and we will make every effort to see you in a timely fashion.

Thank you for taking the time to complete this paperwork. We welcome any suggestions you may have for improving the Medical History Form and we look forward to the privilege of participating in your care.

Please bring the enclosed forms with you to your scheduled office visit.

Your appointment is _____ with _____.

If you would like to learn more about our office prior to your appointment, please visit our website at www.hollandboneandjoint.com.

We look forward to meeting you.

Sincerely,

The Bone and Joint Center