New Patient Check List

Please bring the following items with you to your first office visit. Failure to do so may result in rescheduling your office visit.

| | Photo Identification |
|--------------|---|
| | Insurance Card(s) |
| Cash, (| Co-pay if applicable. We accept the following form of payment Check, Mastercard, Visa and Discover. |
| | Medical Records |
| hearin | Hearing Tests (It may be necessary for us to repeat your g test) |
| —— images | Radiology (MRI, CT). We ask that you bring a copy of the on a disk. |
| brina a | If your insurance requires a referral or authorization, please copy of the referral or authorization with you |