

Dear Patient,

We are very glad that you have chosen Dermatology Center of Southern Indiana. Our goal is to ensure all our patients have a comfortable and positive experience, while in our care.

In order to expedite your check-in process, please fill out the registration forms you have downloaded and bring them with you to your appointment. When downloading these forms, please understand that all Medicare patients are to fill out the **Medicare patient registration and Medical History form**. For all other patients, please fill out the **Patient information form and Medical History form**. Some insurance companies require a referral from your primary care provider before we can see you. If you do not have your card or referral at the time of your appointment, insurance regulations require that you sign a financial waiver. All co-pays and deductibles are to be paid at the time of service. We file all insurance claims for medical services and bill you any remaining balance, which is to be paid promptly. If insurance is not responsible or available, full payment must be paid at the time of service.

We look forward to being of service to you. If you need to cancel your appointment with one of our physicians, we would appreciate a 24 hour notice. If you have any questions, please feel free to call our office at 1-812-339-6434 or toll free at

1-800-834-5840.

Sincerely,

Dermatology Center Of Southern Indiana