



**Department of Ear, Nose, Throat, and Audiology**  
**Telephone: (425) 252-0895**

Welcome to our office! Please review this page, so that you understand what information our office needs in order to provide you with excellent medical care.

**When you come to your appointment, please bring the following:**

- Completed Patient Registration Form (see link)
- Completed Patient History Form(s) (see link)
- Signed Financial Policy (see link)
- Signed Cancellation Policy (see link)
- Signed Consent Form (see link)
- **Medical Insurance Cards. If no card is submitted at the time of your appointment you may be asked to pay privately or reschedule your appointment.**
- Written referral from your primary care physician, if required by your insurance.
- Previous x-rays, ultrasounds, cat scans, laboratory tests & medical records related to this condition from your primary care physician.
- Photo ID will be required at the time of check-in in order to protect you from identity theft.

**Please be prepared to pay for the following at the time of your visit:**

- Co-payment (we would appreciate the exact amount due as our office does not carry an excess amount of change.) **Please note that our office only accepts cash or checks for the co-payment, no credit or debit cards accepted.** A service charge of \$15 will be billed for co-payments that are not paid at the time of service.
- If you do not have insurance, please call and we will be glad to give you an estimate of what the cost of the visit will be. Payment is expected at the time of service.

**A note about referrals:** Please do not assume that your referral has been approved unless you have received **confirmation from your insurance company**. Please call your Primary Care Provider to make sure that the referral has been accomplished prior to your appointment. Our entire staff is here to help you in whatever manner we can. If you have any questions please feel free to give us a call prior to your appointment.

**If you are unable to complete your paperwork prior to appointment, please arrive 20 minutes early.**

**THANK YOU!**