

NEW PRACTICE MEMBER – What to Expect at Your First Visits:

Thank you for trusting us with your health care concerns. We have outlined what you can expect in our office because we want you to feel comfortable here. Please read, fill out and sign the required paperwork and bring it with you to your appointment.

FIRST VISIT:

- ☛ All new practice members are requested to **fill out this personal health history** and return it to the front desk. You will then be given a brochure to read explaining “Subluxation”.
- ☛ A one-on-one consultation with the doctor will be done to discuss your health concerns. A **Complete Chiropractic and Neurological Diagnostic Examination** will be given. This includes tests necessary to determine the precise state of your spine. **Specific Chiropractic Postural X-Rays** may be recommended and associated fees discussed.
- ☛ At the completion of your first visit, payment for examination services will be collected. (the initial exam is \$155, plus any needed x-rays between \$195 and \$535)
 - (*Insurance: We will provide you with a Super Bill if you would like to submit a claim to your insurance company. Once your Care Plan is established we would be happy to submit claims for you.*)

SECOND VISIT:

- ☛ You will return for your **Report of Findings** (at no additional cost). At this visit the Doctor will explain your exam results and provide you with a packet of exam findings for your records. You will be asked to familiarize yourself with this information before your Orientation.
- ☛ If the Doctor feels he can help your particular situation, you may choose to receive an adjustment and begin your care (The fee for any pre-Care Plan adjustments is 75.00).

THIRD VISIT:

- ☛ You will attend a **Healthy Living Orientation** (at no additional cost). During this time you will learn about health and healing through Chiropractic. This discussion will include an explanation of your recommended Chiropractic Corrective Care Plan and what results can be obtained. You will also be advised of any insurance coverage and offered discounted financial plans as appropriate for your particular situation.

We are glad you are here and promise to do our best for you!

x I have read and understand the preceding: _____
Signature Date