

River Walk Surgery
3838 San Dimas, Bldg B, Suite B-231
Bakersfield, CA 93301

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| <input type="checkbox"/> C. VINCENT PHILLIPS, M.D. | <input type="checkbox"/> EDWARD TAYLOR, M.D. |
| <input type="checkbox"/> JAVIER MIRO, M.D. | <input type="checkbox"/> DENISE PORTUGAL, M.D. |
| <input type="checkbox"/> JOHN BUXTON, M.D. | <input type="checkbox"/> VAHDATYAR AMIRPOUR, M.D. |

YOUR APPOINTMENT IS SCHEDULED FOR: _____ (DATE) _____ (TIME)

THANK YOU FOR CHOOSING US AS YOUR HEALTH CARE PROVIDER. ENCLOSED YOU WILL FIND A PACKET OF INFORMATION THAT WILL NEED TO BE CAREFULLY READ, FILLED OUT AND BROUGHT TO YOUR APPOINTMENT. WE HOPE THAT BY DOING THIS, IT WILL EXPEDITE THE TIME TAKEN AWAY FROM YOUR BUSY SCHEDULE.

IMPORTANT – PLEASE READ:

- 1. All pages of this packet must be filled out front and back before you come to the office for your appointment. Bring the filled out packet with you to your appointment. Do not mail this packet to our office.**
- PLEASE READ AND SIGN THE FINANCIAL POLICY.
- MAKE SURE YOUR AUTHORIZATION, X-RAYS AND MEDICAL RECORDS ARE EITHER AT OUR OFFICE OR IN YOUR POSSESSION FOR YOUR APPOINTMENT. THE ABSENCE OF THIS INFORMATION MAY CAUSE US TO RESCHEDULE.
- BRING A LIST OF MEDICATIONS AND ANY QUESTIONS YOU MIGHT HAVE FOR THE DOCTOR. THIS WILL ALLOW OUR DOCTOR TO ADDRESS THEM ON YOUR APPOINTMENT DATE.
- BE PREPARED TO PRESENT INSURANCE CARD, DRIVERS LICENSE AND NECESSARY PAYMENT FOR THE DATE OF SERVICE.

WE LOOK FORWARD TO SEEING YOU AND MAKING YOUR VISIT A PLEASANT ONE.

SINCERELY,

THE STAFF

WE ARE LOCATED AT 3838 San Dimas, Bldg. B, Suite B-231
(661) 665-0505 FAX: (661) 665-7844