

# Ralph A. Brooks, M.D.

Dermatology and Dermatologic Surgery

909 9<sup>th</sup> Avenue, Suite 405  
Fort Worth, Texas 76104  
(817) 870-9718

Dear New Patient:

As a new patient we would like to welcome you and give you some additional information about our office.

**Initial Visit:** This visit usually takes approximately 20 minutes. Please verify if we have received a referral from your Primary Care Physician if this applies to your insurance. Please give us all your information regarding your health insurance. Payment is due at the time of the appointment and the amount will depend upon your insurance coverage.

**Additional Visits:** If further treatment is necessary Dr. Brooks will ask to see you back in the office. These additional visits will usually be for 20 minutes or if surgery is required 40 minutes to 2 hours. Please check with our office to verify insurance coverage and referrals. Please remember to verify the referral before your visit. However, if Dr. Brooks treats you without a referral then payment becomes your responsibility. Dr. Brooks will not treat you without a current referral. Please keep in mind all referral do expire either by date or number of visits.

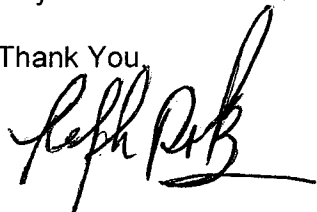
**Medication:** If medication is needed, Dr. Brooks will write out a prescription with the instructions. To get a refill of your medication, please call your pharmacy and have a refill request fax to the office at 817-335-5608. All refills will take approximately 2 business days.

**Cancellations:** As a courtesy to you, we will try and contact you by phone to confirm your appointment. If you need to cancel your appointment, please call 24hrs. before your scheduled appointment. You can also leave a message on our answering system. **If you fail to show for your appointment you will be charged a \$25.00 No Show fee.**

**Insurance:** We will be more than happy to file your insurance for you. Patients with deductible, if your deductible has not been met payment is due at time of service. Patients with co-payment amount is due at time of service.

As it is our goal to provide the best care for our patient's we would like to help you in any way that we can. Please tell us if there is anything we can do for you.

Thank You,



Ralph A. Brooks, M.D.

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Patient Signature

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Witness