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Thank you for choosing Central Florida Hand for your healthcare. We are committed to your care being successful and your experience in our office being pleasant.

**The Following is an outline of our policies and procedures.**

**Office Hours:** Monday – Friday from 8:00am- 5:00pm

**Medications:** Will only be filled during office hours, and only at the discretion of your health care provider.

**Forms:** A fee of \$15.00 per form is required for the completion of forms, including and not limited to disability forms & FMLA. Please allow 7-10 business days turnaround time for form completion. Prepayment is required.

**Medical Records:** All Medical Record request be submitted in writing. Please allow 7-10 days for record processing. There is a charge of \$0.50 per page.

**Outpatient Scheduling:** Please allow 5-7 business days for ancillary scheduling ordered by your physician (i.e. MRI, Pain Management, Etc.) If your insurance carrier required authorization it may delay scheduling.

**Surgery Scheduling:** Please allow 5-7 business days for surgery scheduling. There may be further delay if medical clearance is required.

**Referral/Authorization:** In the event your insurance requires a referral or authorization from your primary physician; it is YOUR responsibility to make arrangements with that office to get the referral/authorization to us prior to appointment. Your appointment will be rescheduled if the appropriate referral/authorization is not received. If you are seen without a referral, YOU are responsible for payment.

**Radiology:** It is imperative for you to bring all x-ray reports pertinent to your visit. We do have access to view CD ROMS/ DVD's or films of any kind of disk. Disk are \$15.00

**Rescheduling-** Occasionally an emergency will necessitate the need to reschedule appointment. Please keep your phone numbers updated in our records.

**Financial:** We will bill your insurance for our service as a courtesy. **We do require you to pay your co-payment or co-insurance at the time of service.** If you are unaware of what your benefits are, you should contact your insurance company prior to your appointment with us. It is your responsibility to understand the terms and benefits of your contact. Any balance due from you after insurance has paid will be due 30 days from receipt of your statement. In the event a large balance is due, we can arrange a payment plan.

**No Show-** Be aware that if you do not keep your appointment or call within 24 hours to cancel you will be charged \$25 fee.

**Post Op Care-** Your insurance allows 90 days of post op care included in your surgery cost. This applies to the **DOCTOR'S VISIT ONLY. ANY SUPPLIES, CAST, PIN REMOVAL, INJECTABLES, X-RAY OR ANY OTHER PROCEDURE IS SUBJECT TO YOUR COPAY/DEDUCTIBLE/OUT OF POCKET PER YOUR INSURANCE COMPANY.**

**I have read and understand the above policies and procedures and will adhere to them. I also authorize payment of medical benefits to Central Florida Hand Specialist.**

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Patient/Guardian Signature

Chart #

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Patient/Guardian please print name

Date