

OWEN DRIVE SURGICAL CLINIC OF FAYETTEVILLE, PLLC
F. ANDREW MORFESIS, MD, FAACS
SANFORD HAWKINS-RIVERS, MD
513 OWEN DRIVE
FAYETTEVILLE, NC 28304

Dear _____

Welcome to Owen Drive Surgical Clinic of Fayetteville. We feel honored to serve you. Paperwork often delays patient care. Please help us to serve you better by filling out the attached forms and bringing them with you on the day of your appointment. It is important that you bring all of the following:

- *Drivers License
- *Social Security Card
- *X-rays / reports
- *A list of your medications (or the medication itself)
- *Health Insurance Cards
- *All necessary telephone numbers
- *Referral authorization letters, if needed

Please arrive 10 minutes prior to your appointment time. (Note: If the patient is a minor, the parent/legal guardian must be present for the first appointment.)

APPOINTMENT DATE: _____ TIME: _____

Patients with specific dollar co-pays will be asked to pay at check-in, those with co-pay percentages are expected to pay at check-out. Self-pay patients are required to pay a minimum of \$150.00 on the day of the visit.

Please be advised that waiting times can vary. All of our providers take trauma call at the hospital and scheduled surgeries can take longer than anticipated especially if there are complications. This will have an effect on when the provider starts seeing clinical patients. Patients are not seen on a first come first served basis, but by scheduled appointment times and also by specific provider. We also schedule work-in emergency appointments. We will try to have you taken care of in a timely manner as best as we can under the circumstance for that day. We will inform you of any expected delays upon check-in.

Thank you for choosing us as your provider.

Owen Drive-Surgical Clinic of Fayetteville, PLLC