



John T. Killian, MD

Sharon Mayberry, MD

Your appointment is confirmed for: ____ Birmingham ____ Montgomery ____ Decatur
on _____, _____ at _____.

Please arrive 15 minutes before your appointment time for the registration process.

- Please fill out the Patient History form before you come to our office; bring it with you at the time of your appointment. Please do **not** mail it back.
- An Orthopedic Examination may be different from other medical examinations you or your child may have had. Three things are essential for making your first appointment a success:
 - a. X-rays: If your child has had x-rays taken, we will need those x-rays as a part of the evaluation. If the x-rays were taken at a facility other than St. Vincent's or Children's Hospital, you will need to bring them to the appointment. We suggest that you call the facility in advance to notify them you will be picking up x-rays. We can view x-rays that have been taken at St. Vincent's or Children's Hospital.
 - b. Other Specialists: If your child has been seen by another specialist (neurologist, neurosurgeon, medical geneticist, physical medicine, PT/OT or another orthopedic surgeon) please bring their office records with you. If any lab work has been performed please be sure to bring that with you.
 - c. What to Wear? The orthopedic examination is a thorough evaluation and may require examination of the hips and spine, even for a foot problem. Have your child wear comfortable loose-fitting clothing that is easily removed. Advise them in advance they may need to remove all clothing except for their underwear. We will provide shorts and a gown for the evaluation.
- Insurance and payment due at appointment: You must bring your insurance or Medicaid card in order for us to bill your insurance company. Co-payment is required at the time of service and can be made by cash, check, Visa, MasterCard or Discover.
 - a. HMO members: We will collect your co-payment. Please be sure that your primary care physician has submitted a referral, otherwise you will be responsible for the charges if there is no referral.
 - b. Contracted PPO Members: We will collect either your co-payment or percentage and submit the claim to your insurance company for you.
 - c. Non-contracted PPO Members: We will collect a percentage and submit the claim to your insurance company for you. You will be responsible for any unpaid balance after billing.
 - d. Medicaid members: Please be sure that your primary care physician has submitted a EPSDT referral prior to your appointment, otherwise you will be responsible for the charges if there is no referral.

Thank you for your cooperation. We look forward to meeting you and your child.

If our office can be of further assistance before the visit, please call.

Main Office: 205-933-8588 Main Fax: 205-933-8573