



PHYSICAL MEDICINE & REHABILITATION PATIENT WELCOME CHECKLIST

South Bend Clinic Main Campus
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574-204-6440

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We look forward to seeing you at the South Bend Clinic Physical Medicine and Rehabilitation Department for your upcoming appointment.

Please fill out the entire new patient packet to ensure the highest quality of care. There will be a delay in your appointment or the need to reschedule your appointment if you fail to bring in the completed packet. In addition to the completed packet bring any films or reports of X-Rays, CT and MRI scans that have been done outside the South Bend Clinic. Having the films or reports will assist the physician in understanding your condition. If you have seen another Physical Medicine and Rehabilitation or Pain Management physician in the past, please have those records faxed to the office prior to your appointment at fax # 574-239-1435.

PATIENT CHECKLIST:

_____ Completed New Patient Packet Form

_____ Collected any films or reports of X-Rays, CT and MRI Scans (NOT done at the South Bend Clinic) ready to bring to the appointment.

_____ Confirm medical records from previous Physical Medicine and Rehabilitation or Pain Management physician (outside the South Bend Clinic) have been faxed to the South Bend Clinic Physical Medicine and Rehabilitation Department.

Plan of care to be determined by the physician at the time of your new patient appointment.

****PAIN MEDICATION OR NARCOTIC MEDICATIONS ARE NOT A GUARANTEE.** The physician will determine the medical necessity of medications at your new patient appointment.

If you have any questions about your upcoming appointment please call our office at 574-204-6440.