

Date:	
Patient Name:	Patient Address:
Dear	:
you on P	rateful you have chosen us as your provider and we look forward to seeing lease bring your insurance card with you and arrive at least 20 minutes to complete additional paper

Enclosed you will find our new patient packet that includes the following forms:

- 1. Patient Registration Form
- 2. Southwest Care Center Health and Medical History
- 3. Consent for Treatment
- 4. Patient Portal Consent of Use Form
- 5. Release of Information Pharmacy form
- 6. Release of Medical Records form
- 7. Demographic data form optional
- 8. Resident and Income Information optional

Please complete the enclosed forms and bring them with you to your first appointment. You may also bring them to the office prior to your visit and give them to the patient access specialist at the front desk.

It is recommended that you request that your medical records from your previous provider be sent to your new provider prior to your first appointment. The Release of Information form is provided in this packet to facilitate this; simply complete this form and submit this to your existing provider's office and request records be directly forwarded to Southwest CARE Center. If you already have your records, you may bring these to your clinic prior to your first appointment for your new provider to review. This information is important for your new provider to provide the best quality care at your first visit.

Income information is requested in the registration packet in order for Southwest CARE Center to be able to review this information for possible additional services for those in need. Please be advised Southwest CARE Center is not responsible for any ancillary services ordered by our physicians.

You will also find enclosed an Authorization to Release Medical Records Form. In order to help our providers prepare for your visititis useful to have a copy of your prior medical records in your file before you come for your appointment. We respectfully request that you complete the form and submit it to your previous provider or return it to our office before your visit and we will submit the form to your previous provider. If you need additional form(s) please contact our office at (505) 955-9454 or come by and we will print additional forms for you.

Please bring all your medications to your first visit for documentation purposes.

If you have any questions or need to change your appointment time please call our office. Thank you again for choosing Southwest Care.

SOUTHWEST CARE CENTER (505) 955-9454 toll free (888) 320-8200

649 Harkle Road • Suite E • Santa Fe • New Mexico • 87505 • fax (866) 513-1763

1691 Galisteo Street • Suite D • Santa Fe • New Mexico • 87505 • fax (877) 919-7961

901 West Alameda • Santa Fe • New Mexico • 87501 • fax (877) 794-5841

4710 Jefferson NE • Albuquerque • New Mexico • 87109 • fax (866) 517-7043

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