

# Park Avenue Orthotics, Inc.

155 East 55<sup>th</sup> Street, Suite 200, New York, NY 10022

(TEL) 212.297.0362

(FAX) 212.697.3697

Patient Diagnosis / ICD Code \_\_\_\_\_ Date of Injury \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (Required for WC/Auto Injury)

Left \_\_\_\_\_ Right \_\_\_\_\_ (Required For Billing)

Game Ready Rental

ThermoTek Rental

Breg Polar Cube

Doctor's Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(Required)

## PATIENT INFORMATION:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Apt \_\_\_\_\_ DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Sex: M \_\_\_\_\_ F \_\_\_\_\_

## DELIVERY RECEIPT AND ADVANCE BENEFICIARY NOTICE OF NONCOVERAGE (ABN)

**NOTE:** Insurance providers do not pay for everything, even for some care that you or your health care provider have good reason to think you need. Cold therapy is not covered by most insurance carriers.

**WHAT YOU NEED TO DO NOW:** Please read the above ABN notice and ask us any questions that you may have so you can make an informed decision about your care. Then please select one of the two options below about whether to receive the item.

**OPTIONS: Check only one box. We cannot choose a box for you.**

**OPTION 1:** I want the item(s) listed above. I understand that I am responsible for payment. **I cannot appeal if my insurance carrier is not billed.**

**OPTION 2:** I do not want the item(s) listed above. I understand with this choice I am **not** responsible for payment.

PATIENT/AUTHORIZED SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Notice of Privacy Practices and Patient Rights: Please call our office at 212.297.0362 for more information about Park Avenue Orthotics, Inc. Privacy Practices and Patient Bill of Rights.

Card Number \_\_\_\_\_ Amount \$ \_\_\_\_\_

Card Holder's Signature \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVC Code \_\_\_\_\_

Billing Zip \_\_\_\_\_

**NO RETURNS** DEFECTIVE EQUIPMENT MAY BE EXCHANGED

[www.gameready.com](http://www.gameready.com)



[www.thermotekusa.com](http://www.thermotekusa.com)



Rental Start Date \_\_\_\_\_

Rental End Date \_\_\_\_\_