



## PATIENT INFORMATION

Appointment Date \_\_\_\_\_ Appointment Time: \_\_\_\_\_

### Appointments

- Please give 24 hours notice if you need to cancel your appointment.
- Please arrive at least 10 minutes prior to your appointment time. If you are late, 15 min or more, then it may be necessary to reschedule your appointment.
- All images will be delivered to the referring doctor as directed.

### Insurance

Fees for images are payable at the time of your appointment. We do not accept assignment of benefits for this procedure. You will be provided with the necessary information for possible reimbursement for your insurance carrier. Contact your insurance carrier for coverage.

### Pregnancy

If you are pregnant, or think you may be pregnant, contact your physician prior to scheduling your appointment.



Please call us at **702.735.1010** to schedule an appointment for your initial examination.

**Stephen T. Chenin, DDS**  
**David A. Chenin, DDS, MSD**

We are proud to invite you to our office and look forward to meeting you.

Fax: 702-735-6823

Email: [info@cheninOrtho.com](mailto:info@cheninOrtho.com)