

AURORA INTERNAL MEDICINE, PC  
Complete Physical Exam Notification

Patient Name: \_\_\_\_\_

Date of Exam: \_\_\_\_\_ Appointment with Dr. \_\_\_\_\_

I understand that I am scheduled for a complete medical exam which could include a PAP and Pelvic exam for female patients.

This is considered a preventive medicine with most insurance carriers. Some insurance policies do not have benefits for preventive medicine (this includes Medicare). PLEASE NOTE-This is **not** a “welcome to Medicare” exam. If my insurance policy is one of those who do not pay for this physical exam I understand that I am responsible for the balance due. This would include lab work that may be ordered by my physician but not done in this office. I understand that I will be billed from the provider performing these services.

Charges for this exam and testing may include:

Exam ages 65 and over      new pt-\$230.00      established pt-\$190.00

Exam ages 40-64      new pt-\$205.00      established pt-\$170.00

Exam ages-18-39      new pt-\$180.00      established pt-\$155.00

Exam ages 12-17      new pt-\$180.00      established pt-\$155.00

Hemmocult: 1 test-\$40.00

Urinalysis-\$10.00

EKG-\$60.00

Hepatitis A-\$85.00

Spirometry-\$60.00

Hepatitis B-\$100.00/shot (requires 3 shots)

\_\_\_\_\_  
Patient's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
AIMC employee witness