



STEVEN GEDULDIG, DPM ♦ JAMES KUHN, DPM ♦ HOLLY KORGES, DPM  
 DIPLOMATES, AMERICAN BOARD OF PODIATRIC SURGERY, CERTIFIED IN FOOT SURGERY

<p><b>MISSOURI:</b>          1956 Copper Oaks Circle          Blue Springs, MO 64015          816.228.6995</p>	<p><b>KANSAS:</b>          8550 Marshall Dr, Ste 120          Lenexa, KS 66214          913.677.3600            153 W. 151st St., Ste. 120          Olathe, KS 66061          913.829.6800</p>
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### SURGICAL DEPOSIT POLICY

Thank you for scheduling surgery with Foot Specialists of Kansas City, P.A. The following policies have been designed to maintain an efficient surgery schedule and to ensure the fair distribution of the doctors' limited surgery time for all of their patients. We hope the policies do not cause insignificant inconvenience and appreciate your cooperation. Your surgery is scheduled on \_\_\_\_\_.

- **How much?** A deposit of \$100 in cash, check, CareCredit or credit card (Visa, MasterCard, or Discover) is required to reserve your desired surgical date, and is due at the time you schedule surgery.
- **When to reserve space?** You are welcome to make your reservation for surgery on the day of your appointment. If you later realize that work or other scheduling conflicts exist, your deposit will be fully credited toward a more convenient surgery date. (see next section)
- **Rescheduling.** In order to receive full credit for your deposit, please notify our office at least two weeks prior to your scheduled procedure date. We understand that personal situations can arise unexpectedly and you may reschedule your surgery as often as necessary without penalty provided we receive two weeks advance notice. Patients providing less than two weeks' notice will incur an administrative charge of one half of their original deposit (\$50). The remaining half will be credited toward the rescheduled surgery.
- **Cancellation.** Patients canceling surgery three weeks or more prior to their surgical date will receive their full deposit back. Those patients cancelling surgery less than two weeks prior to their surgery date will forfeit their \$100 deposit. If our administrator has determined that a refund is required due to unforeseen circumstances, the deposit will be refunded.
- **Insurance.** The patient remains responsible for all remaining balances after insurance processes the surgery claim. Foot Specialists of Kansas City, P.A. will bill your insurance as a courtesy to you, but obtaining any pre-certification, pre-determinations and/or referrals for procedures is the sole responsibility of the patient. If your insurance does not pay for the full balance of your surgery, your deposit will be applied to that balance and you will be responsible for any difference. If they pay more than your deposit amount, you will be refunded any remaining deposit, minus any other balances.
- **Final Payment.** Final payments must be received within 30 days of receiving a claim from insurance. We accept money order, bank check, credit card or CareCredit for remaining surgery balances.
- **Refunds.** All refunds are mailed by check within two weeks of cancellation or final insurance processing.

Thank you for placing your trust in Foot Specialists of Kansas City, P.A. If you are unable to pay your surgical deposit, please contact our business office immediately so payment arrangements can be made.

**\*\*I certify that I have read this form, fully understand and comply with the financial terms related to my surgical procedure.\*\***

\_\_\_\_\_  
 Signature of Patient or Legal Representative

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Printed Name of Patient

\_\_\_\_\_  
 Date of Birth