

## Welcome

We look forward to your visit with us. Please take a few moments to read the following instructions:

1. **PLEASE REVIEW AND COMPLETE ALL ENCLOSED FORMS.**  
On the **Patient Questionnaire** do not forget to list the **name, address, telephone and fax number(s)** of your referring physician and primary care physician; we will forward a copy of your procedure report to them. **Bring all completed forms with you to your appointment.**
2. **\* VERY IMPORTANT \* - Ask for the "Registrar Only"**  
Pre-register with the hospital's Outpatient Registration Department for your appointment by calling **415-600-3676**. Please specify Dr. Binmoeller, Dr. Soetikno or Dr. Shah as your attending physician at California Pacific Medical Center. You will need to provide your name, address, **Insurance Information**, referral diagnosis, and referring physician.
3. **HAND CARRY YOUR X-RAY FILMS TO YOUR APPOINTMENT** (CT Scans, Ultrasounds, MRIs – Preferred on CD). The doctor will review the films on the day of your visit. If you bring in images on a CD, the physician may keep them with your records. **PLEASE DO NOT MAIL** the films/CD to us.
4. **IES is going GREEN! PLEASE bring your own BELONGINGS BAG to save on waste.**
5. **ARRIVE ONE-HOUR BEFORE YOUR SCHEDULED APPOINTMENT.**  
Please call 415-600-1151 to verify the location of your check-in. Upon arrival our staff will take your **completed** questionnaire(s), any X-ray films and other information you have for the doctor to review.

**\*\*\*\*\* ATTENTION \*\*\*\*\***

We wish to provide excellent patient care and meet the needs of both our patients and their families. Occasionally unexpected durations of prior procedures and emergent procedures may cause a delay in your scheduled appointment. We will do our best to minimize any delays. We ask for your understanding so that every patient receives dedicated care.

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Thank you!  
*Interventional Endoscopy Services*