

Instructions for New Patient Paperwork

Please print and complete the following documents and fax them to 502-690-8090 or mail them to:

Graven & Associates, PLLC, 8007 Lyndon Centre Way, Suite 101, Louisville, KY 40222

Should questions arise then you will be contacted via phone. **If a document is left incomplete then it may delay your appointment.** If you have questions, please call the office at 502-690-8024.

FORMS FOR ADULTS 18+

- **Form 1** Adult New Patient Information Form (Ages 18+)
 - Please review and complete all blanks including the medication list.
 - **Form 3** Authorization for Use and Disclosure of PHI
 - This form is for any other doctor or any other individual such as a family member that you would like to be informed of your care.
 - Please complete all highlighted items.
 - **Form 4** Telehealth Informed Consent
 - Please review and complete if you are interested in telehealth services.
 - **Form 5** Notice of Privacy Practices
 - Please review.
 - Provide a **LEGIBLE COPY OF THE FRONT AND BACK OF A PHOTO ID** (e.g., valid driver's license).
 - Provide a **LEGIBLE COPY OF THE FRONT AND BACK OF YOUR PRIMARY INSURANCE CARD.**
 - Provide a **LEGIBLE COPY OF THE FRONT AND BACK OF YOUR SECONDARY INSURANCE CARD** (if applicable).
 - Provide a **LEGIBLE COPY OF LEGAL PAPERWORK** (e.g., power of attorney, guardianship, domestic violence order, custody agreement).
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FORMS FOR CHILDREN AND ADOLESCENTS 17 AND BELOW

- **Form 2** Child/Adolescent New Patient Paperwork
 - Please review and complete all blanks including the medication list.
 - **Form 3** Authorization for Use and Disclosure of PHI
 - This form is for any other doctor or any other individual such as a family member that you would like to be informed of your care.
 - Please complete all highlighted items.
 - **Form 4** Telehealth Informed Consent
 - Please complete if you are interested in telehealth services.
 - **Form 5** Notice of Privacy Practices
 - Please review.
 - Provide a **LEGIBLE COPY OF THE FRONT AND BACK OF A PHOTO ID** (e.g., valid driver's license).
 - Provide a **LEGIBLE COPY OF THE FRONT AND BACK OF YOUR PRIMARY INSURANCE CARD.**
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