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Jason A. Talavera, M.D.  
Susan Dana, ARNP

Appointment for: \_\_\_\_\_

With: \_\_\_\_\_ Date: \_\_\_\_\_

Appointment Time: \_\_\_\_\_ Location: \_\_\_\_\_

We have prepared this packet of information and patient forms in order to help make your first visit a convenient and pleasant experience.

We ask that you please complete the attached paperwork prior to arrival. If you have questions about your appointment please call our office at **425-225-2700**.

**When you come for your appointment, please bring the following:**

- Completed Patient Registration Form
- Signed Friends and Family Form
- Notice of Privacy Practices
- Signed Patient No Show, Late Cancellation Policy
- **Medical Insurance Cards.**
- A complete printed list of all medications, vitamins, minerals, supplements, and herbs including the strength and dosages.
- Photo ID will be required at the time of check-in in order to protect you from identity theft.

**Please be prepared to pay for the following at the time of your visit:**

- Co-payment (we would appreciate the exact \$ amount due to the fact that our office does not carry an excess amount of change.)  
**Our office accepts cash, checks, VISA or Master Card for the co-payment.**
- If you do not have insurance, please call our billing office at (425) 892-1400 and we will give you an estimate of what the cost of the visit will be.

**A note about referrals:** You cannot assume that your referral has been approved unless you have received **confirmation from your insurance company.**

Please call your Primary Care Physician to make sure that the referral has been accomplished prior to your appointment.

Our authorization staff is here to help if you have any questions regarding a referral please feel free to give us a call prior to your appointment at (425) 225-2705 – this line is for referral/authorization's only, if you have a question about your appointment call our main number at (425) 225-2700.

**PLEASE ARRIVE 30 MINUTES EARLY FOR YOUR APPOINTMENT TO FILL OUT YOUR PAPERWORK.**

**\*\*IF YOU BRING YOUR COMPLETED PAPERWORK WITH YOU, PLEASE CHECK IN 15 MINUTES PRIOR TO YOUR APPOINTMENT TIME.**

This is to allow our office time to complete the administrative portion of your appointment and have your chart ready for your visit.

**THANK YOU!**

Our main clinic is in the South Everett/Mill Creek/ Silver Lake area. Our cardiologists also see patients in satellite locations in North Everett, Arlington, Monroe and Bothell. All scheduling is done through our main clinic.

**Main Clinic – South Everett/Silver Lake**

12728 19th Ave SE  
Suite 200  
Everett, WA 98208  
Phone - 425- 225-2700  
Fax - 425- 225-2790

**North Everett**

4301 Hoyt Ave  
Everett, WA 98203  
Ph – 425-225-2700  
Fax – 425-225-2790

**Arlington**

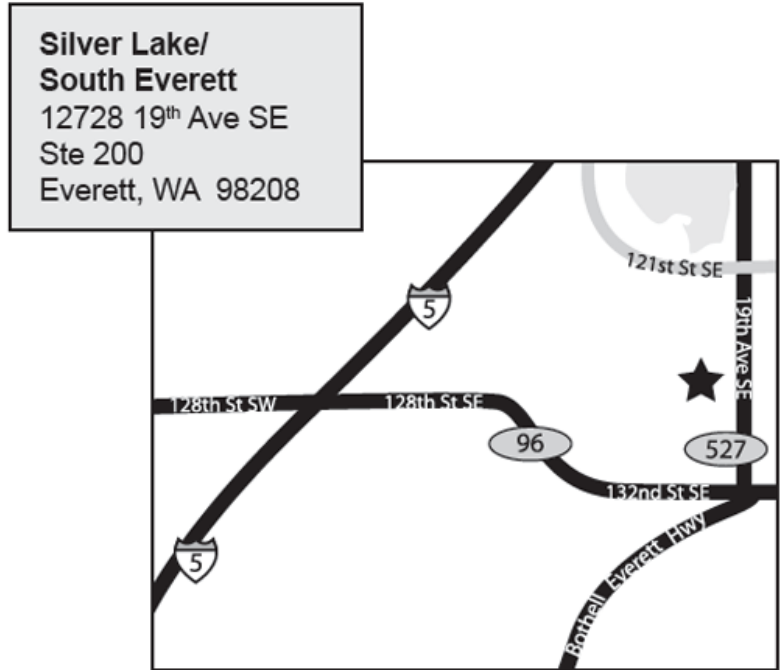
7530 204th Street NE  
Arlington, WA 98223  
Ph – 425-225-2700  
Fax – 425-225-2790

**Monroe**

14841 179<sup>th</sup> Ave SE Suite 210  
Monroe, WA 98272  
Ph – 425-225-2700  
Fax – 425-225-2790

**Bothell/Canyon Park/Woodlands**

1909 214th Street SE  
Suite 211  
Bothell, WA 98021  
Ph – 425-225-2700  
Fax – 425-225-2790



**Directions to Main Clinic – South Everett/Silver Lake**

- From I-5 North or South
- Take exit 186
- Head East onto 128th St. SE/WA -96 E
- Turn left onto 19th Ave. SE (Bothell-Everett Highway)
- Destination will be on your left, approximately 0.5 miles