



Please complete the enclosed **ANESTHESIA PATIENT QUESTIONNAIRE AND CREDIT CARD DEPOSIT** form. **Submit** completed forms to Joy Anesthesia two weeks prior to your appointment. Forms may be submitted via **mail, secure email (please call for a link to our secure email), or fax.**

Read and carefully follow the **PRE-ANESTHESIA INSTRUCTIONS** that are enclosed. Please read and keep the **FINANCIAL POLICY, PRIVACY POLICY** and **POST-ANESTHESIA INSTRUCTIONS.**

It is recommended that you contact your insurance carrier about coverage for general anesthesia.

Please let your insurance company know we are out-of-network providers.

Also, ask your doctor for a letter of medical necessity and your treatment notes to attach to your claim.

Please call Joy Anesthesia if you have questions.

Read the **ANESTHESIA CONSENT FORM.** This form is not meant to scare or frighten you. It is to inform you. Anesthesia in the out-patient setting has been shown to be safe and efficient. The doctor will discuss and answer any questions that you may have before any treatment is performed. We will call or text you the evening before your appointment to explain what to expect during your visit. Please leave a contact number that is readily available for that call or text.