

**Pearl Family Practice, P.A.**  
**950 West University Ave Suite 104**  
**Georgetown, TX 78626**  
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**[www.pearlfamilypractice.com](http://www.pearlfamilypractice.com)**

**[drk@pearlfamilypractice.com](mailto:drk@pearlfamilypractice.com)**

Welcome to Pearl Family Practice, P.A. We are committed to your healthcare and well-being. We accept patients commencing at 2 years of age to young adults and elderly. As your primary care physician, Dr. Raju Kurunthottical (also known as Dr. K) will provide all your medical care needed and refer you to a specialist based on medical necessity.

**Initial Visit**

- Bring completed and signed new patient forms available on our website at [www.pearlfamilypractice.com](http://www.pearlfamilypractice.com)
- Insurance card
- Government issued photo ID (Driver's license)
- All prescription medication bottles to accurately document current medications.

**Subsequent Visits**

- Insurance card
- Notify us of any changes (name, address, phone (home, cell, or work), employment or insurance coverage.) This way we can accurately update your records.

**Same Day/Walk in Visits**

- All efforts will be made to accommodate you in a timely manner.

**Emergency**

- Dial 911 and have someone take you to the nearest emergency room. Dr. Kurunthottical or physician on call will be notified by hospital staff. You need to inform them Dr. Kurunthottical is your primary care physician.

**Missed Appointments**

- Our office requires a 24 hr notice if you need to cancel or reschedule an appointment. There is a \$25 charge for every missed appointment. We understand that time is very valuable and there are instances where unexpected events occur and we will take that into consideration.

**Medical Records**

- Under section 165.2 of the Texas Medical Boards, practitioners may charge for copies of medical records, special reports, additional insurance forms, letters, etc. The current rate is \$25 for first 20 pages then \$ .50 for each additional page.

**Medical Insurance**

- We accept most major insurance plans. As a general rule, please contact your specific plan so that you can avoid incurring additional cost of "out-of network provider." Please note we do not participate in workers comp plans.

**Financial Policy**

- Please review and sign the financial policy

**Signed** \_\_\_\_\_

**Date** \_\_\_\_\_

**Print Name** \_\_\_\_\_