

# **Helpful Telephone Numbers**

Pre-Registration 855-890-9241
Hospital Billing (NWH) 617-726-3884
Physician/Provider Billing (MGPO) 617-726-3884
Web Address www.nwh.org

# Insurance changes or registration updates

If you have any changes to your insurance, please call up to 7 days prior to your appointment to update your insurance for this appointment. This call typically takes a few minutes. Please have your insurance information available. Insurance plans vary in their requirements. Your plan may require a potential referral, authorization, or out-of-pocket payment for this visit. Pre-registration is available Monday-Friday from 8 AM – 5 PM at 855-890-9241.

# **Parking**

There is plenty of free parking all around the building, you enter through the front door. The entrance at the back of the building is closed to allow for screening every patient when they enter the building.

# \*\*PLEASE NOTE OUR LOCATION\*\* The Spine Center 159 Wells Ave, Newton, MA 02459

Ph: 617-243-5777 Fax: 617-243-6110

#### **Patient Instructions**

Our patient hours are Monday through Friday 8:00 AM to 5:00 PM. Our phones hours are Monday through Friday 7:30 AM to 4:30 PM. We ask that patients arrive 30 minutes prior to your procedure or new patient appointment time or 15 minutes prior to your follow up appointment time in order to prepare you for your visit. Please print and complete the Spine Center New Patient Packet (attached or located on our website at <a href="http://www.nwh.org/clinical-center/your-visit/">http://www.nwh.org/clinical-center/your-visit/</a>.

For your comfort during the exam, you may want to bring shorts and a t-shirt or sports bra. We require that patients refrain from using creams, scented lotions or perfumes on the day of their visit.

# MRI's or X-rays

If you have any recent MRIs done in the year prior to your visit and they were not performed at NWH or MGH, please bring the images and reports to your appointment.

## **Insurance Referrals**

If your insurance requires a referral to see a specialist, you are responsible for obtaining that referral from your Primary Care Physician prior to your appointment and ensuring that we have received it. If the department has not received the referral your appointment will be cancelled, or you will be asked to sign a waiver stating that you are aware that you are being seen without a referral and no further appointments or diagnostic tests will be scheduled. Please fax all referrals to 857-282-5654.

# **Co-Payments**

If your insurance requires a copayment, it is due at the time of your visit. We accept payment in the form of a credit card. Full payment for self-pay visits and procedures, such as prolotherapy & acupuncture, are due at the time of the visit.

The Spine Center is a hospital based outpatient clinic, it is standard to receive one bill representing the physician charges from their billing provider (MGPO) and another bill representing the hospital/facility charges from NWH. For questions regarding the physician's bill, please call 617-726-3884. For questions regarding the hospital bill, please call 617-726-3884.

# NWH PAIN AND SPINE CENTER 159 WELLS AVE NEWTON, MA 02459 (617) 243-5777 OR (617)243-6142

We look forward to seeing you at your upcoming appointment. Please complete the necessary forms attached and bring them with you to your visit.

During the COVID-19 era, health care will be delivered in new and innovative ways to ensure the health and safety of our patients, family members and staff. Newton-Wellesley Hospital's clinical leaders and infection control experts have analyzed every aspect of our operations and changed the process by which we deliver care to keep everyone safe. As a result, your experience will feel different in some ways – but it will still be the exceptional experience our hospital is known for.

Here's what you can expect when you visit us.

## BEFORE YOUR VISIT

- **Symptom Screening**: Before your appointment, you will be asked to complete a survey on Patient Gateway about any symptoms you may be experiencing or any recent exposure to COVID-19. This survey must be completed 72 hours prior to your visit. Based on your responses, you may be contacted by our staff to answer additional questions.
- **Visitor Policy**: Patients who require a caregiver, experience communication or mobility issues, or are under the age of 18 and require a parent or guardian may be accompanied by visitors. All other visitors are not permitted at this time.
- Mask Policy: All patients and providers are required to wear a mask (except when alone in a room).
   You may wear your own mask into the building but will be asked to change to a new mask provided by our staff.

#### **DURING YOUR VISIT**

- **Arrival:** To ensure proper social distancing, it is essential to maintain an on-time schedule. You should arrive as close to your scheduled appointment "arrival time" as possible.
- Checking In: Enter our facility through the front entrance, sanitize your hands, and don a mask before walking down the hall and to the right to the Spine Center waiting area. Check in with one of our staff members at the desk prior to sitting down. If you have used e-check in on Patient Gateway, you will still to inform a staff member of your presence.
- **Symptom Screening**: You will be asked several questions over the phone about any COVID-19 symptoms you may be experiencing before proceeding to your appointment.
- **Staff Interaction**: Staff will maintain six feet of distance from you whenever possible. Providers will wear appropriate PPE, including a mask, throughout the entirety of your visit, including any physical exams or testing.
- **Checking Out**: Scheduling of follow-up appointments will take place in your exam room or procedural area, at the front desk, or by phone after your appointment is complete.

Please know that you can feel confident that your care will be of the same high quality and safety you've come to know and expect from Newton-Wellesley Hospital. For more information on the steps we are taking across our organization, please see our Safe Care Promise. Thank you for your patience and understanding. As always, it is a pleasure and a privilege to care for you.



**Spine Center / Newton-Wellesley Hospital** 

Label or	
Name: Date of Birth:	

159 Wells Ave	•
Newton, MA 02459	

Newton, MA 02459						
Spine Center Questionnaire						
What is the main problem for which you are s	seeking treatr	ment?				
Please list prior spine surgeries, if any (date	and type):					
Circle your <b>current</b> pain: 0 1 2 (none)	3 4	5 6 (moderate)	7	8 9	<u>10</u> severe, eme	ergency)
Please mark the location of your pain:						
Front Back  Please list the medications that you have tr	ied for your <b>c</b>	☐ Intermitte ☐ Occasion  How do the  Walking Sitting Lying down	Dull Dull Thro  o you ha (every m nt, occurr al  followin	obbing [ ave this pa inute of the ring daily	Burning Shooting in? day)	=
Please check the treatments you have tried	for your cur	•	Relief	Moderate	Relief F	ccellent Relief
☐ Physical Therapy	Dutoo	]			1101101 27	
☐ Injections (epidural, facet, etc.)		 [	_			
Are you currently experiencing any of the  Muscle weakness Fever or Severe night pain Weight I	· chills	Genital nu ☐ Feeling de			nal numbne ifficult or fre	ss quent urination
Allergies:						
What is your occupation?			_ Are yo	ou currently	working? _	
What do you do for exercise?						

If your primary care doctor is not in the Mass General Brigham system, please provide a list of your medications in the space below or bring your own list.

Medication Name	Dose	Frequency (times per day)			



# NEWTON-WELLESLEY HOSPITAL NEWTON, MASSACHUSETTS SPINE CENTER

EFFECTIVE DATE: POLICY TYPE: ADMIN

10/30/12 CLINICAL

DEPARTMENTAL X

## SPINE CENTER CANCELLATION, LATE, NO SHOW AND WAIT LIST POLICY

**PURPOSE:** The purpose of this policy is to ensure that all patients are scheduled appropriately should they cancel, fail to appear for their appointment or request placement on a wait list.

**SCOPE:** This policy applies to the Spine Center in the Department of Rehabilitation Services.

**POLICY & PROCEDURE STATEMENT:** All Spine Center staff and patients will be made aware of this policy. Staff will be expected to schedule visits accordingly. A record of cancellations and no shows is maintained within the patient's scheduling history.

**DEFINITIONS:** N/A

#### PROCESS:

- I. CANCELLATION: A patient may call any time up to the day before the scheduled appointment to cancel an appointment. A Monday appointment must be cancelled no later than the Friday before. A patient may reschedule a cancelled appointment.
- II. LATE: A patient who is more than 15 minutes late for an evaluation or 10 minutes late for a follow up appointment without prior notification of staff may need to be rescheduled. This decision will be up to the discretion of the individual physician and may require the patient to wait until scheduled patients are seen.
- III. NO SHOW: A patient who attempts to cancel an appointment the day of the appointment except in extenuating circumstances is considered a NO SHOW. Three "NO SHOW'S" over the total of a year will prevent any further scheduling within the Spine Center. The patient will be referred to at least 2 other programs that will meet their needs.
- IV. WAIT LIST: When patients request placement on a wait list, their name, the nature of their chief complaint, any extenuating circumstances, and their temporarily assigned appointment date will be logged. Every effort to accommodate an earlier appointment time attempted based upon acuity and time to next appointment.

 $\textbf{REFERENCES:} \ \ \text{N/A}$ 

ORIGINATOR: SPINE CENTER, DEPARTMENT OF REHABILITATION SERVICES

**ORIGINATION DATE:** 07/01/02

**SPONSOR:** Spine Center Coordinator

COLLABORATOR (S): N/A

REVIEWED: July 2006 REVISED: July 2015



CROSS-REFERENCE: N/A

APPROVAL BY: Medical Co-Director, The Spine Center; Director of Ambulatory Services

CANCELLATION: N/A

KEY SEARCH WORDS: cancellation policy, appointments, late, no show, wait list,

cancellation, spine, spine center

ATTACHMENTS: N/A

# Acknowledgement of Receipt of Spine Center Cancellation, Late and No Show Policy:

The goal of the staff at the Spine Center is to accommodate patient requests for an appointment to see their provider in a timely manner. This can be a challenge when appointments are missed or canceled at the last minute. The staff keeps a list of patients waiting for an appointment. In order to effectively use this list, the clinic needs 24 hours to contact patients and offer them a more convenient appointment time.

In an effort to improve this process, the Spine Center has developed a policy for patients to use as a guide when it is necessary to cancel or change an appointment. We do understand that there are extenuating circumstances and we will handle these on a case by case basis. Please review the policy and acknowledge below that you have received a copy.

I have received and reviewed a copy of the Spine Center Policy.	
Signature:	_ Date: