



RHEUMATOLOGY

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1600 S Beacon Blvd | Suite 240 | Grand Haven MI 49417
8300 Westpark Way | Zeeland MI 49464
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Dear New Patient,

Welcome to our practice! We are pleased that you chose Holland Hospital Rheumatology for your health care needs. The following information is provided to ensure a smooth transition.

Please complete the new patient forms and bring them with you to your first appointment. This will help speed up the check-in process. These forms are available on our website: www.hollandhospital.org/rheumatology under the Medical Forms link.

We ask that you arrive 10-15 minutes prior to your appointment so that we are able to have your chart ready by your appointment time. Your New Patient appointment is scheduled for:

Date: _____ Time: _____ Provider: _____ Location: _____

If you have insurance coverage, please bring your **current** insurance cards and a valid photo identification card with you at the time of your appointment.

If for any reason you are unable to attend this appointment, please contact us at least 24 hours in advance. If you are not able to make your new patient appointment and you do not contact our office, we will not reschedule your appointment.

Should you have questions, please call us at (616) 393-5336.
Thank you! We look forward to meeting you soon.

Warm regards,

Our Rheumatology providers and staff