## **Activation Form**

Date:	Staff Name :	Contact Method :
05/08/2017	dfhfhfgh fdhgfhghg	Walk In

## A. INTRODUCTION FOR ALL CALLS

(A1)	Thank you for calling Advanced Physical Therapy Of Central Florida help you?	, how can I
(A2)	May I have your name? dfhfhfgh fdhgfhghg	
(A3)	What is the best phone number at which to reach you?	
(A4)	jhgjghj, hgjghjkgh, ghjk7, 1, And may I have your address? 76867	
	IF THEY ASK WHY: We want to get you to the office closest to your home.	
(A5)	And may I have your birthdate as well? 01/22/2000	
(A6)	Okay, dfhfhfgh fdhgfhghg how did you hear about us?	
	Physician	
(A7)	Very good, welcome to Advanced Physical Therapy Of Central Florida	
	my name is, dfhfhfgh fdhgfhghg	
(8A)	What exactly is wrong and how can we help you? Pain	
(A9)	Alright, and are you currently under the care of a physician for this problem?  • Yes • No	
(A10)	May I have his or her name please? Arjang Abbasi	
(A11)	Do you know the name of your doctor's group or their phone number?	
(A12)	When did your Pain happen? 05/08/2017	
(A13)	And are you experiencing a lot of Pain , medium or a li  Medium	ttle bit?

(A14)	I'm sorry to hear you're experiencing so much Pain you in as soon as possible. Are you seeking in home care or would ○ HomeCare ● Out Patient	We'll try to get d you be coming to us?
(A13)	Which office is most convenient? SW State Road 200 in Ocala, SI Belleview, or The Villages?	E 17th Street in Ocala,
	First Choice OCALA SR200 Second Choice OC	ALA SR200
(A14)	14) Have you been here before?   Yes  No	
(A15)	Mhat day of the week works best for you? Tuesday	
(A16)	16) And are mornings or afternoons better?   Mornings   Afterno	oons () Anytime
(A17)	<ul> <li>Are you looking to get in as soon as possible or can you wait a fe</li> <li>● Urgent ○ Can Wait a Week ○ Can Wait a Month</li> </ul>	ew days?
(A18)	18) Okay, let me go ahead and check to see exactly what times we hack, okay? (Hold)	nave available and I'll be right
(A19)	are you still there? Great New	s! We have two appointments
	available on Tuesday , one at (time #1)	and one at (time #2). Which
	one do you prefer? 5/8/2017 12:00:00 AM	
(A20)		and one at (time #2). Which
	one do you prefer? 5/8/2017 12:00:00 AM	and one at <b>(time #2)</b> . Which
(A21)	one do you prefer? 5/8/2017 12:00:00 AM  20) Okay, I'm going to go ahead and put you down for 5/8/2017 12:00:00 AM  Now I'm going to reserve this spot for you, so if for any reason you	and one at <b>(time #2)</b> . Which
(A21)	one do you prefer? 5/8/2017 12:00:00 AM  Okay, I'm going to go ahead and put you down for 5/8/2017 12  Now I'm going to reserve this spot for you, so if for any reason you reschedule, call us at least 48 hours in advance to let us know, or	and one at <b>(time #2)</b> . Which
(A21) Now	one do you prefer? 5/8/2017 12:00:00 AM  A20) Okay, I'm going to go ahead and put you down for 5/8/2017 12  A21) Now I'm going to reserve this spot for you, so if for any reason you reschedule, call us at least 48 hours in advance to let us know, on the service of the service	and one at (time #2). Which  00:00 AM  ou might have to cancel or okay?
(A21) Now	one do you prefer? 5/8/2017 12:00:00 AM  20) Okay, I'm going to go ahead and put you down for 5/8/2017 12:02  21) Now I'm going to reserve this spot for you, so if for any reason you reschedule, call us at least 48 hours in advance to let us know, on the company of the company for your services? Medicare  D. MEDICARE  20) Okay, do you have your card handy? (IF NOT, THEY WILL NEED 1)	and one at (time #2). Which  00:00 AM  ou might have to cancel or okay?
(A21) Now (D1) (D2)	one do you prefer? 5/8/2017 12:00:00 AM  120) Okay, I'm going to go ahead and put you down for 5/8/2017 12:  121) Now I'm going to reserve this spot for you, so if for any reason you reschedule, call us at least 48 hours in advance to let us know, on the company of the company for your services?  122) MEDICARE  123  124  125  126  127  127  128  129  129  120  120  120  120  120  120	and one at (time #2). Which  00:00 AM  ou might have to cancel or okay?

(D5) And may I have the policy holder's date of birth?

(D6)	Okay and do you have a secondary or Medigap policy as well? OYes ONo •Yes ONo
(D7)	And what is the name of that policy?
(D8)	May I have the policy number?
(D9)	And is there a group number?
(D10)	May I have the name of the policy holder?
(D11)	And may I have the policy holder's date of birth?
(D12)	Have you received any physical therapy treatment this year? O Yes  No
(D13)	And are you currently being seen by a home health agency? O Yes   No
J.	ADVANCED PHYSICAL THERAPY & QUICK CARE PATIENTS HEAR 'APPLE'
	APPLE
(J1)	(Attire) Since it is your (body part) I'd like for you to wear (tank top/shorts/loose clothing) so its easier for you to participate in your exam. We do have gowns available but they're not quite as comfortable as your own clothes.
(J2)	(Paperwork Via Email) Would you like me to email you the paperwork? ● Yes ○ No
	What is your email address? <a href="mailto:sanjay.yadav@karmicksolutions.com">sanjay.yadav@karmicksolutions.com</a>
(33)	(Payment) Also remember to bring some form of payment like check, card, or cash. If for any reason you feel like your deductible or co-insurance is too high, don't worry; we have programs available for that.
(J4)	(Late) Also, don't be late; we have a pretty strict late policy and we'll have to reschedule if you are late.
(35)	(Early) Also, since you are using insurance and there's paperwork involved, come 20 minutes early before your appointment; that way we can take care of all those things.
(36)	So we'll see you on 5/8/2017 12:00:00 AM Okay dfhfhfgh fdhgfhghg ; it was nice talking to you and we look forward to seeing you soon. Have a wonderful day!