**[Patient Name]**,

This confirms your appointment with Dr. David on **[day, date and time]**. Please arrive for your appointment 10 minutes early. We are happy to bill your auto insurer for these visits. Please complete the attached MVA Intake form and bring it with you to your appointment. The information you provide will help us to bill your claim. If you are unable to complete the forms before your appointment we have copies here.

We ask for 24 hours notice of cancellation of appointments.  We do charge for missed appointments/late cancellation; those costs are not covered by insurance.

Here is the link to our website, [www.rise2health.com](http://www.www.rise2health.com).  You can also find our MVA Patient Intake Form online. I have sent you a link to PatientAlly, our secure online patient portal. Please take a few minutes to enroll. It is a good option for checking on upcoming appointments and communicating with the office.

Our address is 1623 NE Broadway, Portland, Oregon 97232.  We are on the right hand side of Broadway next to the Postal Annex under the burgundy awning, just a block down from Helen Bernhardt’s Bakery.

We look forward to meeting you.