

**MICHAEL M. PAPALIAN, MD**

Plastic & Reconstructive Surgery

[www.DrPapalian.com](http://www.DrPapalian.com)

**PATIENT INFORMATION REGARDING OFFICE FINANCIAL  
POLICIES FOR COSMETIC SURGERY**

THE OFFICE OF MICHAEL M. PAPALIAN, MD

AS PATIENTS CONSIDER COSMETIC SURGERY, THEY FREQUENTLY NEED INFORMATION ABOUT THE VARIOUS PAYMENT OPTIONS AND HAVE QUESTIONS ABOUT OUR FINANCIAL POLICIES. WE HOPE THE FOLLOWING INFORMATION WILL BE HELPFUL.

**PAYMENT OPTIONS**

WE PROVIDE A NUMBER OF PAYMENT OPTIONS, WHICH MAY BE USED INDIVIDUALLY OR COMBINED TO MEET YOUR NEEDS.

**FINANCING COMPANIES**

WE HAVE PARTNERED WITH CARE CREDIT, WHICH OFFERS FINANCING PLANS FOR COSMETIC PATIENTS. DR. PAPALIAN DOES NOT PARTICIPATE IN ALL CARE CREDIT PLANS. PLEASE CONSULT WITH THE OFFICE STAFF AND INQUIRE ABOUT WHICH PLANS ARE OFFERED.

**CASH OR CHECK**

PERSONAL CHECK, CASHIER'S CHECK, OR CASH ACCEPTED.

**CREDIT CARDS**

WE ACCEPT VISA AND MASTERCARD.

**OFFICE CONSULTATION FEE**

THE FEE FOR YOUR COMPREHENSIVE CONSULTATION WITH DR. PAPALIAN IS \$100. THE CONSULTATION FEE IS APPLIED TOWARD YOUR PROCEDURE SHOULD YOU DECIDE TO HAVE A PROCEDURE PERFORMED BY DR. PAPALIAN.

**MEDICAL INSURANCE**

OUR STAFF IS AVAILABLE TO ASSIST YOU WITH ANY QUESTIONS YOU HAVE REGARDING INSURANCE COVERAGE FOR YOUR PROCEDURE. IF ALL OR PART OF YOUR PROCEDURE IS COVERED BY INSURANCE, YOU WILL BE RESPONSIBLE FOR CO-PAYMENTS AND DEDUCTIBLES AS PER YOUR AGREEMENT WITH YOUR INSURANCE COMPANY.

**SCHEDULING FEE FOR COSMETIC SURGERY**

WHEN YOU SCHEDULE YOUR COSMETIC SURGERY, A NON-REFUNDABLE SCHEDULING FEE OF \$300.00 IS REQUIRED TO RESERVE A DATE FOR YOUR SURGERY. THIS FEE WILL BE APPLIED TOWARD YOUR SURGEON'S FEE.

**RESCHEDULING FEE FOR COSMETIC SURGERY**

AFTER INITIALLY SCHEDULING YOUR COSMETIC SURGERY, IF YOU RESCHEDULE TO A LATER DATE, AN ADDITIONAL NON-REFUNDABLE SCHEDULING FEE OF \$300.00 WILL BE REQUIRED. THIS FEE ALSO WILL BE APPLIED TOWARD YOUR SURGEON'S FEE.

**THE PLASTIC SURGERY CENTER ON WOODSIDE**

2055 Woodside Road, Suite 150

Redwood City, CA 94061

Ph 650-364-6060 Fax 650-364-9405

[contact@drpapalian.com](mailto:contact@drpapalian.com)

**MICHAEL M. PAPALIAN, MD**

Plastic & Reconstructive Surgery  
www.DrPapalian.com

**SURGEON'S FEE**

DR. PAPALIAN'S SURGERY FEE (SURGEON'S FEE) INCLUDES ALL PRE AND POST-OPERATIVE VISITS FOR A ONE-YEAR PERIOD. THE PROPOSED SURGEON'S FEE WILL BE IN EFFECT FOR 6 MONTHS FROM THE DATE QUOTED. ADDITIONAL EXPENSES INCLUDING BUT NOT LIMITED TO LAB WORK, PATHOLOGY, X-RAYS, EKG, PRESCRIPTIONS, MEDICAL CLEARANCE, AND SUPPLIES ARE NOT INCLUDED IN THE SURGEON'S FEE, AND WILL BE YOUR RESPONSIBILITY IF NECESSARY. YOU WILL BE GIVEN AN ESTIMATE OF WHICH NON-SURGEONS FEES YOU MIGHT EXPECT TO INCUR. IN THE RARE EVENT THAT A COMPLICATION ARISES, YOU WILL BE RESPONSIBLE FOR COSTS ASSOCIATED WITH THAT TREATMENT.

**SURGEON'S FEE DUE DATE**

DR. PAPALIAN'S REMAINING SURGERY FEE, MINUS THE SCHEDULING FEE(S), IS DUE TWO WEEKS PRIOR TO YOUR SURGERY DATE. IF THE SURGEON'S FEE IS NOT RECEIVED TWO WEEKS BEFORE YOUR SURGERY DATE, YOUR SURGERY WILL BE CANCELLED AND THE DATE OFFERED TO ANOTHER PATIENT. AS NOTED ABOVE THE SCHEDULING FEE(S) WILL BE NOT BE REFUNDED.

**HOSPITAL OR FACILITY FEE COSTS**

PAYMENT OF THE HOSPITAL OR FACILITY FEE FOR YOUR COSMETIC PROCEDURE IS ALSO DUE 2 WEEKS PRIOR TO YOUR PROCEDURE. PAYMENT FOR THE HOSPITAL OR FACILITY FEE, WHERE YOUR PROCEDURE IS PERFORMED, IS YOUR RESPONSIBILITY. AS A COURTESY TO YOU, DR. PAPALIAN MAY COLLECT AND PAY THE FACILITY DIRECTLY FOR YOU. ANY ADDITIONAL HOSPITAL OR FACILITY FEES INCURRED AS A RESULT OF ANY COMPLICATION, WHICH MAY ARISE, ARE THE PATIENT'S RESPONSIBILITY.

**ANESTHESIA FEES**

FEES FOR ANESTHESIA SERVICES ARE ALSO DUE TWO WEEKS PRIOR TO YOUR PROCEDURE. AS A COURTESY TO YOU, DR. PAPALIAN, MAY COLLECT THE ANESTHESIA FEE AND PAY THE ANESTHESIOLOGIST DIRECTLY. THE FEE IS THE RESPONSIBILITY OF THE PATIENT. ANY ADDITIONAL ANESTHESIA FEES, AS A RESULT OF ANY COMPLICATIONS, WHICH MAY ARISE, ARE THE PATIENT'S RESPONSIBILITY.

**FINANCIAL RESPONSIBILITY FOR REVISION SURGERY**

REVISION OF COSMETIC SURGERY IS RARELY, BUT SOMETIMES NECESSARY. WHEN NECESSARY, MOST REVISION SURGERY IS NOT PERFORMED SOONER THAN ONE YEAR AFTER SURGERY. THIS ALLOWS TIME FOR ALL SWELLING TO RESOLVE AND HEALING TO BE COMPLETED. THE SURGEON'S FEE FOR REVISION SURGERY WILL BE EVALUATED ON A CASE-BY-CASE BASIS AND BE DETERMINED SOLELY BY DR. PAPALIAN. HOWEVER, YOU WILL RESPONSIBLE FOR THE COST OF THE OPERATING ROOM, ANESTHESIA, AND OTHER COST INCLUDING BUT NOT LIMITED TO, LAB WORK, PATHOLOGY, X-RAYS, EKG, PRESCRIPTIONS, MEDICAL CLEARANCE, SUPPLIES AND ANY CONSULTING DOCTOR'S PROFESSIONAL FEES.

**THE PLASTIC SURGERY CENTER ON WOODSIDE**

2055 Woodside Road, Suite 150  
Redwood City, CA 94061  
Ph 650-364-6060 Fax 650-364-9405  
[contact@drpapalian.com](mailto:contact@drpapalian.com)

**MICHAEL M. PAPALIAN, MD**

Plastic & Reconstructive Surgery

[www.DrPapalian.com](http://www.DrPapalian.com)

**COSMETIC SURGERY CANCELLATION POLICY**

THE CANCELLATION POLICIES FOR DR PAPALIAN ARE SEPARATELY LISTED. PLEASE CONSIDER OUR CANCELLATION POLICY PRIOR TO SCHEDULING YOUR SURGERY. IF THE SURGEON'S FEE IS PAID BY CREDIT CARD AND SURGERY IS SUBSEQUENTLY CANCELLED, AN AMOUNT EQUAL TO THE MERCHANT'S FEE PAID BY DR. PAPALIAN FOR THE CHARGE WILL NOT BE REFUNDED. THIS WILL BE IN ADDITION TO THE NON-REFUNDABLE FEE(S) NOTED ABOVE. PATIENTS WHO USE THIRD PARTY FINANCING ARE PERSONALLY RESPONSIBLE FOR ALL NON-REFUNDABLE SCHEDULING, RESCHEDULING AND CANCELLATION FEES, REGARDLESS OF THEIR FINANCING STATUS.

**BREAST IMPLANT WARRANTIES**

BREAST IMPLANT MANUFACTURERS OFFER WARRANTY INSURANCE. YOU ARE AUTOMATICALLY PROVIDED WITH A BASIC LEVEL OF COVERAGE WITH YOUR BREAST AUGMENTATION PROCEDURE. YOU MAY ELECT TO PURCHASE ADDITIONAL INSURANCE. THE OFFICE CAN PROVIDE YOU WITH INFORMATION ON ADDITIONAL INSURANCE THAT YOU MAY PURCHASE DIRECTLY WITH THE MANUFACTURER WITHIN 45 DAYS OF YOUR PROCEDURE. PLEASE INQUIRE AS TO YOUR CURRENT OPTIONS AS PLANS MAY PERIODICALLY CHANGE. THE OFFICE WILL PROVIDE YOU WITH THE MOST CURRENT INFORMATION.

**THE PLASTIC SURGERY CENTER ON WOODSIDE**

2055 Woodside Road, Suite 150

Redwood City, CA 94061

Ph 650-364-6060 Fax 650-364-9405

[contact@drpapalian.com](mailto:contact@drpapalian.com)