



ANDREW D. HEWCHUCK, D.P.M.

310 West Line Street  
Bishop, California 93514  
Telephone: (760) 872-1636

ORTHOSES AND DURABLE MEDICAL EQUIPMENT POLICY

Fees for foot orthoses, ankle-foot orthoses, and other special-ordered durable medical equipment include all fitting, dispensing, and any necessary modifications for three months following the date of dispensing.

Your insurance may or may not cover certain orthoses and other types of durable medical equipment. Our office will attempt to verify your insurance coverage for such devices in advance. However, as with any medical service, you are ultimately responsible for any fees incurred. We require a non-refundable, 50% deposit on all orthoses and other special-ordered durable medical equipment. The balance is due on receipt of the devices.

If you have any questions regarding this policy, please inquire in advance of ordering.

Device Ordered: \_\_\_\_\_

Total Fees: \_\_\_\_\_

Deposit (50%): \_\_\_\_\_

Balance (due upon receipt): \_\_\_\_\_

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date