



Phenicell Regenerative Institute

Financial Policy

(as of Oct 2020)

Patient Name: _____ **Date:** _____

Procedure: _____

Regenerative medicine treatments including stem cells, exosomes, and PRP can be expensive. Therefore, Phenicell makes every effort to make financing as easy and as flexible as we possibly can. Ultimately, **you are responsible for the entire bill**, at a price that is mutually agreed upon.

Please check one of the following boxes:

Option A:

You may pay in full all at once at the time of scheduling the procedure. We offer a full refund if there is cancellation up to ONE week prior to the procedure and BEFORE we order the NON-REFUNDABLE perishable stem cells or exosomes. You would only lose a \$100 administrative penalty.

Option B:

Pay 50% down at the time of scheduling to demonstrate commitment and reserve your place. The remainder of the balance (50%) must be paid by one week before the procedure. We offer a full refund if we do not ultimately do

the procedure, minus a \$100 administrative penalty.

Methods of Payment (select all that apply):

- Cash
- Check
- Health Savings Account (HSA)
- Flexible Spending Account (FSA)
- Third-party payers such as CareCredit, GreenSky, Advanced Medical, etc.

For more details or assistance, please contact **Amy Marlowe** (email amy@drshehadi.com or call 614.220.5648). Our staff looks forward to working with you and providing the best care possible.

Agreed Upon Price for above mentioned procedure(s): \$ _____

Patient or financially responsible person (Signature):

X _____ **Date:** _____

Treating physician, Joseph A. Shehadi, MD, FAANS

X _____ **Date:** _____