



Today's Date: _____ Phone #: _____

Family/Last Name: _____

Mother's First Name: _____

Mail Address: _____

email: _____

Approx. Due Day: _____ Hospital will deliver: _____

Obstetrician: _____ OB Phone #: _____

Prenatal Registration

Congratulations!!! A new baby on the way is an exciting time for parents-to-be, and there are many decisions to be made, including finding a pediatrician. Next are some important information and introductory questions to get us started.

We hope you found it informative.

Dr Maria Arreaza has credentials to visit newborn patients at the following hospitals**:



Due to the increase in the number of newborns at hospitals**, we are updating our Prenatal and Newborn form policies.

Parents must register before the delivery date by submitting the respective form to our office using the mother's full name, date of birth, phone number, email, and home address.

We encourage registered patients to notify us prior to the delivery day.

IMPORTANT: Only calls from Hospital** personnel announcing deliveries of mothers registered at Mar and Sea Pediatric will be attended by Dr. Arreaza or by qualified hospital member with equivalent credentials when Dr Arreaza is not available.

_____ Initials

Parents of newborn patients are required to adhere to the Pediatric Hospital Protocols before to schedule an appointment at Mar and Sea Pediatrics. These protocols include the following procedures:

- **Administering Injected Vitamin K (not orally)**
- **Conducting Metabolic Newborn Screening.**
- **Monitoring Transcutaneous Bilirubin levels. ***

_____ Initials

ANY QUESTIONS FEEL FREE TO CALL US AT 561-270-5144 OR EMAIL: FAXMARANDSEA@GMAIL.COM

** (Boca Regional Hospital - Baptist Group / West Boca Medical Center)



Prenatal Form

Thank you for choosing Mar and Sea Pediatrics as your baby's future care provider. Based on our experience, we will ask you a few introductory questions to get started.

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- 1) Is this your first pregnancy? Yes No

 - 2) Have you had any complications with this pregnancy? Yes No
If yes, please explain: _____

 - 3) Do you have other children? Yes No
If Yes, please specified quantity: _____

 - 4) Is your delivery already scheduled for a cesarean or C section? Yes No

 - 5) How do you plan to feed your newborn? Breastfeed Formula Unsure

 - 6) Do you plan to vaccinate your child according to the recommended schedule?
 Yes No Unsure

 - 7) If you are having a boy, do you want a circumcision? Yes No Unsure
(Dr Arreaza will referred this procedure to a different office)

 - 8) Do you have an Insurance? (Please, review our current insurance accepted list at www.marandseapediatric.com) I'm Self-pay
Provider / Plan: _____
ID # _____ (Newborns need to be added to the coverage.)

 - 9) Is there anything else you would like us to know? _____

Lastly, how did you hear about our practice?

- Google IG Facebook / Other : _____
- From a current office's patient: _____(name)
- From OB or medical provider: _____(name)



NEWBORN INSURANCE ENROLLMENT POLICY STATEMENT

Adding your newborn to your insurance policy is not automatic. **You, the insured, must call and initiate the addition of your new baby to your policy**, including the selection of Dr. Maria Arreaza as the child's pediatrician, also referred to as primary care physician, or PCP. Insurance companies require you to enroll your newborn in your health plan within 30 days of your baby's birth. If your baby is not enrolled, your insurance plan will deny claims for your baby's care and you will be responsible for full payment.

- Contact the **EMPLOYER** that provides the insurance you will be using
- Fill out the necessary enrollment forms to notify the employer of the birth and add your child to the policy
- Submit these forms ASAP
- Call your **insurance company** member services department (the phone number is on the **back of the insurance card**) and:
 1. Confirm receipt of your forms
 2. Confirm enrollment of your newborn
 3. Confirm your choice of a PCP with your insurance
PCP: (MAR AND SEA PEDIATRIC or DR. MARIA ARREAZA)
 4. Request all of your policy information, including the details of your coverage, benefits and limitations. These may include co-payments, coinsurance, deductibles and/or out-of-pocket expenses
 5. Familiarize yourself with policy coverage details and rules, exclusions, referral procedures that may result in patient financial responsibility.

**ANY QUESTIONS FEEL FREE TO CALL US AT 561-270-5144 OR EMAIL:
fax@marandseapediatric.com**

If your baby is not added to the insurance policy within 30 days of their date of birth you will be financially responsible for all charges. It is the patient/parent's responsibility to bring to the office his/her insurance card and information. We are making every effort to keep down the cost of your medical care. **Please understand that you ultimately have the final responsibility of your bill.** If you are applying for Medicaid or Self-Funded coverage through the Marketplace payment is due at time of service until coverage is active. The office will issue you a detailed statement at which time you can submit to the insurance once active for reimbursement.

If you have any questions or concerns, please contact your insurance company immediately. **I certify that I have read the above policy statement and understand that I am responsible for my child's medical cost.**

PATIENT NAME: _____

SIGNATURE OF PARENT: _____ DATE: _____



NEWBORN CARE DISCLOSURE AND PARENTAL SELECTION FORM

The purpose of this disclosure is to provide parents with a clear understanding of the newborn hospital evaluation process and to avoid misunderstandings regarding provider availability, timing of newborn assessments, and hospital discharge planning.

Dr. Maria Arreaza has worked closely with the hospital neonatology teams for many years and is familiar with their standards of care, clinical expertise, and newborn management practices. Dr. Arreaza maintains a professional relationship with the neonatologists who provide newborn care in the hospital and has confidence in their ability to deliver high-quality care to newborn patients.

Regardless of the option selected, the health, safety, and well-being of your newborn remain the highest priority.

NEWBORN HOSPITAL CARE OPTIONS

*Please carefully review the following options and select your preferred newborn care provider during your hospital stay. The parents of the newborn will **notify the nursing staff** of their selection prior to delivery.*

OPTION 1 – NEWBORN EVALUATION BY DR. MARIA ARREAZA

If you choose Dr. Maria Arreaza to evaluate your newborn in the hospital, please understand the following:

- Dr. Arreaza is not physically located in the hospital and primarily provides care to patients in her office during regular business hours.
- Dr. Arreaza may take up to **24 hours after your baby's birth** to perform the initial newborn evaluation.
- Depending on the timing of the delivery, office patient volume, weekends, holidays, or other clinical responsibilities, the newborn evaluation may not occur immediately after birth.
- Waiting for Dr. Arreaza's evaluation may result in a longer hospital stay for both the newborn and mother before discharge can be completed.
- If the delivery is performed by Cesarean section (**C-section**), hospital policy and medical necessity generally require that the newborn be evaluated by the hospital's neonatology team shortly after birth. In such circumstances, the neonatology team may perform the initial newborn assessment before Dr. Arreaza's hospital visit.
- After Dr. Arreaza evaluates your newborn, she will assume responsibility for your baby's outpatient pediatric care following hospital discharge.

OPTION 2 – NEWBORN EVALUATION BY THE HOSPITAL NEONATOLOGY TEAM

If you choose the hospital neonatology team:

- Your newborn will be evaluated by a neonatologist or qualified neonatal provider who is physically present in the hospital.
- The initial newborn assessment is typically performed shortly after delivery.
- Because the neonatology team is immediately available, medical decisions, treatment recommendations, and discharge planning can generally be completed more efficiently.
- This option may facilitate a more timely discharge process for both the newborn and mother when medically appropriate.
- If your baby is delivered by Cesarean section (**C-section**), **the neonatology team will generally evaluate the newborn immediately following delivery as part of the hospital's standard newborn care process.**
- Following hospital discharge, Dr. Arreaza will assume responsibility for your baby's outpatient pediatric care at Mar & Sea Pediatric.

Please select **ONE** option:

OPTION 1

I request that Dr. Maria Arreaza perform my newborn's hospital evaluation. I understand that the initial newborn evaluation may occur up to 24 hours after birth and that this option may result in a longer hospital stay prior to discharge.

OPTION 2

I agree that the hospital's neonatology team will evaluate and manage my newborn during the hospital stay. I will notify the nursing staff of this selection prior to delivery.

ACKNOWLEDGMENT

By signing below, I acknowledge that:

I have read and understood the information contained in this disclosure.

I have had the opportunity to ask questions regarding the newborn hospital care process.

I understand the differences between the two available options.

I voluntarily select the option indicated above.

I understand that regardless of the option selected, all medical decisions will be made based on the best interests and medical needs of my newborn.

Mother's Name: _____

Mother's Signature: _____ **Date:** _____

Father's/Partner's Name (Optional): _____

Father's/Partner's Signature: _____ **Date:** _____