



1800 Heritage Blvd., Midland, TX 79707

Phone No: (432)614-0350 . Fax No: (915)613-0946

Email: recovery.goals@gmail.com

www.recovery-goals.com

IMPORTANT INFORMATION ABOUT YOUR INDEPENDENT MEDICAL EXAMINATION

1. Please bring a **picture I.D.** along with your **Workers' Compensation claim card (if applicable)** as these are necessary to complete your examination in a timely fashion.
2. When you come for your evaluation, please bring all x-rays, x-ray reports, MRIs, lab studies or other pertinent information as this will help us to complete your examination in a timely fashion.
3. If you are unable to keep the date and time of the scheduled examination that has been assigned to you, please call the referring agency (the entity that has arranged the exam for you with us) to make changes or other arrangements. The case managers for all no-shows will be notified immediately and this could affect your benefits. This office will not reschedule your appointment. Your referring agency would have to call us to make any changes. We charge a No Show fee regardless of the cause.
4. Please be prompt. Please plan to arrive on time to prevent any delays in your evaluation. We reserve the right to reschedule you if you are late. Please plan on being here for about 3-4 hours. A map is enclosed with this information.
5. Dr. Gillala will be seeing you as an Independent Medical Examiner. Although he makes recommendations, **he is not your treating physician**. He does not make the final decision regarding your claim and he does not make treatment decisions or implement your treatment.
6. The report of your Independent Medical Exam will be sent directly to whoever referred you to us and you should contact them to get a copy of this report. **Please do not call our office for information about your report.**
7. Please do not ask the doctor for any medical advice, to write any prescriptions or to complete medical report forms, disability report forms or other insurance company forms for other agencies.
8. If you wear glasses, use any type of medical devices, use hearing-aids, or other assistive devices such as canes, crutches, walkers and braces, be sure to bring those with you to the examination.



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9. Continue to take all prescribed medication, as prescribed by your treating physician, and bring all of your medications with you in the containers in which they were dispensed by the pharmacy to the examination. Bring only medication that you are currently using.
- 10 You should not receive a bill for this Independent Medical Examination. However, if by mistake you were billed, please notify this office immediately and do not submit it to your insurance carrier for payment.