



New Patient Registration Checklist

If you are a new patient to our practice, please download this checklist to make sure you have all the forms filled out and the information we need to register you and to make your first appointment. If you have any questions, please contact our office at 703-435-3636 and “dial 4”.

There are 2 sets of forms for specific age groups, 0-6 months of age and 12 months and older. Make sure you complete the correct age group paperwork for your child(ren)’s age group.

Insurance: Please check our website (www.rtcpeds.com) for Billing and Insurance information to make sure we take your Health Insurance. If you have any questions, please contact our Billing Department at 703-435-0726.

Once you complete the paperwork email it to medicalrecords@rtcpeds.com or drop it off at our office, 1830 Town Center Dr. Ste 205, Reston, VA 20190.

Ages 0-11 months:

- Patient Registration Form
- Financial Policy
- Newborn Questionnaire
- Postnatal Depression Scale
- Acknowledgement of HIPAA Privacy Practices
- Copy of Front and Back of Insurance Card
- Records from prior pediatrician or hospital discharge

Ages 12 months and older:

- Patient Registration Form
- Financial Policy
- Pediatric Questionnaire
- TB, Water, Cholesterol and Lead Survey
- Acknowledgement of HIPAA Privacy Practices
- Copy of Front and Back of Insurance Card
- Records from prior pediatrician or hospital discharge