

**DOCTOR & ASSOCIATES, PC  
129 KING'S HIGHWAY NORTH  
WESTPORT, CT 06880**

***WELCOME TO THE PRACTICE!***

**Patient Instructions:**

In order to best accomplish a complete and efficient exam, please review the following New Patient Packet-you will find important information in preparing for your initial consultation visit with Dr. Leslie Doctor.

Please arrive with the following:

1. A list of ALL Medications (prescription and over-the-counter) that you are currently taking.
2. A list of ALL Allergies (drug and environmental sensitivities).
3. The Name, Address and Telephone number of your Primary Care Physician.
4. The Name, Address and Telephone number of the Physician referring you.
5. The enclosed Medical History & Patient Information Forms filled out- Please do not mail or fax to the office, simply bring them to your first appointment.
6. All of your Insurance Cards.

**\*\*IMPORTANT INSURANCE COVERAGE INFORMATION\*\***

It is extremely important that you are aware of your insurance coverage. There are many insurance plans in which the doctors of Doctor & Associates participate. However, many of these plans have variations as well as multiple rules and regulations. The rules and regulations must be followed if you want your insurance plan to cover (pay) for services rendered.

- Do you need a referral to see a specialist? If your plan does require a referral, this **must** come from your Primary Care Physician not the Physician referring you to Doctor & Associates.
- Do you have Co-Pay? Any and all Co-Pays are due at the time of your visit. We are **required** by your insurance company to collect the Co-Pay.
- Does your insurance require you to use a specific Laboratory, Hospital or Pharmacy? If your plan does require specific locations and you do not inform the office, **you** are responsible for the charges incurred.

- For work related injuries, you need to obtain authorization from your employer.
- Not all services are covered by each insurance plan. The office will pre-certify with your insurance carrier for Surgical Procedures but it is in your best interest to be aware of what is and is not covered under your plan. ANY SERVICES(S) NOT COVERED BY YOUR INSURANCE IS YOUR RESPONSIBILITY. YOU WILL BE BILLED ACCORDINGLY.

The office will make every effort to help you with the above, but cannot guarantee that we will know every rule and or regulation. Your cooperation is needed in order for us to service your healthcare needs and ensure that you receive any and all insurance coverage to which you are entitled.

***PLEASE DO NOT HESITATE TO CONTACT THE OFFICE WITH ANY QUESTIONS.***