

ELDERSBURG ARTHRITIS, L.L.C.
6190 Georgetown Boulevard
Suite 110
Eldersburg, MD 21784
410-795-9700 410-795-7500 Fax

Dear Patient,

Thank you for choosing Eldersburg Arthritis, LLC. We look forward working with you and supporting your healthcare journey.

In order to serve you better and to help speed up your check in process, we have enclosed a new patient packet. Please complete and return the forms to our office or bring them with you at the time of your appointment.

BRING THE FOLLOWING ITEMS WITH YOU:

- Picture ID (driver's license, etc)
- Insurance card(s)
- Co-payment
- Last lab results and last office note from your referring physician or primary care physician
- X-ray and/or MRI reports (no films or CD's) if applicable
- Referral (if required by your insurance company). **You must bring a copy of the referral with you or your appointment may need to be rescheduled.** If you are unsure if you need a referral, call your insurance company or primary care physician.
- Name, address, phone and fax number of your referring physician
- List of all current medications

ARRIVE 15 MINUTES PRIOR TO YOUR APPOINTMENT

If you are unable to keep your appointment, please contact us at (410) 795-9700 at least 24 hours in advance. A \$40.00 fee will be charged for missed appointments without prior notice.

Thank you again for choosing Eldersburg Arthritis, LLC as your new rheumatology office.