Comprehensive Sleep Center & Pulmonary Practice
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Thank you for choosing Comprehensive Sleep Center and Pulmonary Practice. We are Pleased to have you under our care.

The included papers are your new patient paperwork and will need to be completed before your appointment. Upon arrival, you will need to have your paperwork, insurance cards, photo ID and a list of your current medications with dosage. Please arrive on time for your appointment and give us at least a 24 hour notice of cancellation so that we may fill your cancelled appointment time. Should you need directions, please call us at the above number. Thank you for your cooperation in these matters, we look forward to seeing you.

Note: The page titled: **Authorization for Use and Disclosure of Protected Health Information** should be filled out as follows:

The first blank line is for the name of any family member or any person(s)-(not including other Doctors or insurance companies) that you give us permission to speak to regarding your health.

Please go next to the line: "type of information to be disclosed". Under this heading, if you mark the box (entire medical record) it allows us to speak to the authorized person regarding anything in your record. Otherwise you can individually mark what you allow us to discuss with the authorized person(s).

Next, go to the Expiration line. This authorization expires in 180 days unless you put another expiration date such as "no expiration" or "1 year", etc.

Please print your name, sign your name and then date the form.