

A. Reza Moattari, MD
Endocrinology, Diabetes, & Metabolism
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Phone 949.706.7706 Fax 949.706.7707

SCOPE OF SERVICES RENDERED:

Our medical care is generally restricted to that portion of medicine referred to as the specialty of “Endocrinology and Metabolism” - the care of diseases related to the endocrine glands, (i.e. pituitary, thyroid, adrenal, sexual glands, etc.), calcium and metabolic bone disease and diabetes. An endocrinologist is a medical doctor who, in addition to an internship and medical residency, has taken an additional two to three years of training in endocrine diseases and metabolic disorders.

Since our services are generally limited to endocrine, diabetes, and metabolism, there fore all patients are urged to maintain their relationship with their primary care provider. As a consultation, Dr. Moattari sees patients in office by appointment only. Dr. Moattari is not available to handle emergency situation. In the event of sudden illness or emergency, patients are expected to go to the nearest emergency room and contact their primary care physician.

PRESCRIPTIONS AND REFILLS:

We prefer not to refill prescriptions outside of office visits or through telephone calls. We ask you to anticipate your needs and inform us regarding the necessary written prescriptions (quantity and refills) at the time of your office visit.

MEDICAL RECORDS:

Your medical records are held in strict confidence. Information will not be provided to third party, (attorney or insurance company), unless we have written authorization from you. Since the assimilation and organizing of pertinent medical information takes time, ours and/or our secretary's, I must charge for this. The charge varies with the amount of information requested.

Please advise our secretary of any changes in your address, phone number, insurance, etc. When you see something that might enable us to do our jobs better, please tell us. We will study it and if it makes sense we will give it a try.

CANCELLATION AND PATIENT FINANCIAL POLICY (PLEASE READ BEFORE SIGNING)

1. There will be a \$25 charge for all returned checks. No third party checks are accepted.
2. Phone consultation are not billed to your insurance and payment is required at the time of the scheduled appointment.
3. Dr. Moattari may recommend laboratory work that will be performed by outside laboratories. If your visit includes lab test , x-rays/scans, you will receive separate billing from the company performing the processing and evaluation of those tests; e.g., Hoag Hospital, Newport Imaging, Newport Diagnostics, Quest Lab, etc.
4. Please remember that you are financially responsible for all services rendered to you at the our office. You may wish to contact your insurance company directly should you have any concerns regarding insurance coverage for medical services rendered by an out of network provider. We will be happy to provide you a Super bill if necessary.
5. To better serve all patients, our office requires at least one business day, at least 24 hours (exclusive of weekends and holidays) notice to cancel any visit. We reserve the right to bill you for 50% of the consultation or follow up fee for not notifying our office regarding your appointment cancellation.
6. Our office strives to provide the best personalized care available for our clients. Thank you for your understanding and feel free to refer any questions to our competent members.

By signing below, your acknowledge that you have read, understand and agree to the above policies.

Print Name: _____

Signature: _____

Date: _____