



North Hills Office
Passavant Prof. Bldg
9104 Babcock Blvd.
Suite 3112
Pittsburgh, PA 15237
412-366-3889
FAX 412-364-6160

Allegheny Office:
Allegheny Prof Bldg
490 East North Ave.
Suite 207
Pittsburgh, PA 15212
412-321-1810
FAX 412-321-2005

Cranberry Office
Cranberry Prof. Park
501 Smith Drive
Unit #1
Cranberry Twp., PA 16066
724-772-2711
FAX 724-935-3045

Mercy Office
Building D
Suite # 5122
1400 Locust St.
Pittsburgh, PA 15219
412-281-0322
FAX 412-281-2327

Steven R. Jones, M.D.
Scott E. Celin, MD, FACS
Philip A. Pollice, MD, FACS
James E. Blaugrund, MD, FACS
Michael S. Srodes, M.D., FACS

Brentwood Office
4190 Brownsville Rd
Pittsburgh, PA 15227
412-281-0322
FAX 412-281-2327

Greentree Office
969 Greentree Rd., 2nd Fl
Pittsburgh, PA 15220
412-281-0322
FAX 412-281-2327

Robinson Office – Robinson Med Ctr
133 Church Hill Road, 1st Fl.
Pittsburgh, PA 15136
412-321-1810 or 866-827-0173
FAX 412-321-2005

Welcome To Our Office

We are pleased that you have selected Metropolitan Ear, Nose & Throat Associates for your care. The following information is provided to help make your visit as efficient and pleasant as possible. Please arrive 15 minutes in advance of your appointment and remember to bring a photo I.D.

Please review your health insurance for recent changes. Your insurance coverage represents a contract between you and your insurance company. Some services may not be covered and payment will be due at the time of service. In addition to an office evaluation, your physician may perform diagnostic testing or procedures. While many of these services are covered, some are not. Your insurance company will be billed; however, you may be responsible for non-covered services under your specific policy.

If your plan requires a referral authorization, it must be obtained in advance of the scheduled appointment. It is your responsibility to request this authorization from your primary care physician. The completed authorization information may be faxed to the office where you will be seen, or you may bring it with you to the appointment.

A current valid health insurance card will need to be presented at the time of your visit.

- **Co pays**
Depending on the benefits offered through your insurance plan, you may be responsible for a co-payment on the date of your visit. *Patients covered by Blue Shield for Federal Employees with enrollment codes 111 and 112 now have a \$100.00 co-pay for some procedures performed in the office.* We accept cash, check, debit cards, Visa, or MasterCard as methods of payment.
- **Diagnostic Results or Medical Records**
If you have received prior treatment for the problem you are being seen for, please bring copies of pertinent medical records and/or diagnostic test results with you to your initial visit (i.e. CT scans, lab reports, previous audiograms, office notes). This will limit delays in your care.
- **Request for Medical Records**
Patients may request copies of Medical Records by signing a release form. Please allow approximately two weeks when requesting records from our office.

We look forward to seeing you soon. Please sign to acknowledge your understanding of the above information.

SIGNATURE OF PATIENT (OR RESPONSIBLE PARTY, IF MINOR)

DATE

Please bring your completed paperwork with you to your appointment. Do not mail.