

Allergy & Asthma Associates of Maine, P.A.
195 Fore River Parkway, Suite 410
Portland, ME 04102
207-774-9839

An appointment has been made for _____ with Dr. Sigler/Chilmonczyk/Musmand/

/Cardona on _____

Enclosed is a history survey. Even though all the questions may not seem pertinent, it is important that these forms be filled out as accurately as possible. This information will assist in determining your diagnosis and what mode of therapy to prescribe. **PLEASE MAIL THE FORMS TO THE OFFICE OR BRING THEM WITH YOU ON THE DAY OF YOUR APPOINTMENT.** Please have your referring physician send us a copy of pertinent information from your or your child's medical record. Chest and sinus x-rays from the past 2-3 years would be helpful. **IF YOU ARE TO BE EVALUATED FOR EXERCISE INDUCED ASTHMA, PLEASE WEAR APPROPRIATE RUNNING SHOES.**

NEW PATIENT APPOINTMENTS MAY LAST FROM 2-3 HOURS DEPENDING ON THE AMOUNT OF TESTING DONE. WE HAVE THE RIGHT TO REFUSE TO SEE A PATIENT THAT IS MORE THAN 15 MINUTES LATE FOR THEIR APPOINTMENT.

If your problem is felt to be allergy related, testing may be done during your first visit. In order to get accurate results from the testing, certain medications need to be stopped. **MEDICATIONS TO BE STOPPED INCLUDE ALL ANTIHISTAMINES.** Below is only a partial list. If a medication is not listed and you are concerned that it may interfere with testing, please give us a call approximately one week before your appointment.

STOP 7 DAYS BEFORE APPOINTMENT (long acting antihistamines)

Alavert	Allerg	Claritan Redi- Tabs	Hydroxyzine	Zyrtec syrup
Allegra	Clarinex	Loratadine	Zyrtec	Zyrtec
Allegra-D	Claritan	Tavist-ND	Zyrtec-D	Zyrtec-D
Atarax	Claritan-D	Vistaril		

STOP 3 DAYS BEFORE APPOINTMENT (short acting antihistamines)

Astelin nasal spray	Chlorpheniramine	Nolamine	Poly-Histine-D	Triaminic
Actifed	Chlor-Trimeton	Novafed	Ronodec	Trinalin
Alka-Seltzer Plus	Codimal	Optimine	Ru-Tuss	Tussi-12
Allerst	Combist-LA	Ornade	Rynatan	Tylenol PM
Atrohist	Comtrex	Pediacare	Semprex-D	
Benadryl	Contact	Periactin	Sinarest	
Bromfed	Deconamine	Phenergan	Sinequan	
Brompheniramine	Dimetane	Polaramine	Sudafed Plus	

Please be aware that various sleep or cold medications contain antihistamines, and these need to be stopped as well.

Tricyclic antidepressants (e.g. amitriptyline), some psychiatric medications and certain ulcer medications (Pepcid, Acid, Zantac and Tagamet) may affect skin testing. Many psychiatric medications need to be stopped 3-7 days before testing and most ulcer medications (except Prilosec and Prevacid) should be stopped 3 days before testing. Please contact your prescribing physician before stopping these medication. If you have any questions, please call us.

If you feel you cannot stop one of the above medications without becoming sick, you may remain on your medication.

Medications that need NOT be stopped prior to your appointment:

- Sudafed (pseudoephedrine)
- Oral and inhaled corticosteroids (e.g. Prednisone, Medrol, Vanceril, Azmacort, Beclovent, AeroBid, Pulmicort, Advair, Flovent, QVAR, Nasacort, Rhinocort, Vancenase, Beconase, Flonase, Nasonex, Nasarel, etc.)
- Antibiotics
- Pure Theophylline preparations (e.g. Slo-Bid, Uniphyll, Theo-Dur and Quibron)
- Bronchodilator inhalers (e.g. Proventil, Ventolin, Serevent, Maxair, Albuterol, Atrovent, Foradil, etc.)
- Cromolyn Sodium (e.g. Intal) and Nedocromil Sodium (e.g. Tilade)
- Singulair

FINANCIAL POLICY FOR ALLERGY & ASTHMA ASSOCIATES OF MAINE, P.A.

Thank you for choosing Allergy & Asthma Associates of Maine, PA as one of your health care providers. We are committed to making your treatment successful and your health is our top priority. The following is a statement of our Financial Policy, which we ask you to review prior to treatment.

Your initial consult will result in charges between \$200.00 and \$800.00. The initial charges include a consult fee consisting of a detailed history and physical examination. There may also be fees for any testing (allergy skin testing and pulmonary function testing) that may be performed during the course of your visit here.

Insurance:

- 80/20 policies – the 20% coinsurance is due at the time of service.
- HMO/PPO type policies – a referral is required to be seen in our office. This is ultimately the patient’s responsibility and we will collect the Co-Pay prior to your visit.
- Patients without insurance – payment is due at time of service, unless prior payment arrangements have been made. We are **VERY** willing to discuss reasonable payment options with you. We also offer a 30% cash discount if we received payment the day of service.

Regarding Insurance:

We accept assignment of most insurance benefits. If there is a balance or if we do not accept assignment of your insurance, it is your responsibility to insure that your insurance company pays or reimburses you for the amount paid at time of visit. Please be aware that some, and perhaps all, of the services provided may be non-covered services and not considered reasonable and necessary under your medical insurance coverage. Your insurance policy is a contract between you and your insurance company. We are not a party of that contract.

Please discuss any billing insurance issues with our billing staff prior to your visit. Please call our Reimbursement Specialist at 774-9839 if you have questions or concerns.

Usual and Customary Rates

Our practice is committed to providing the best health care for our patients and we charge what is usual and customary for Northern New England. You are responsible for payment of any charges incurred in this office regardless of what your insurance company’s arbitrary determination of usual and customary payment unless we are a participating provider with your plan.

Missed Appointments

Unless an appointment is cancelled at least 24 hours in advance, our policy is to charge for missed appointments at the rate of a normal visit. Please help us serve you better by keeping scheduled appointments. Please realize that a missed appointment leaves and opening that could have been filled by a patient waiting to be seen in our office.