

Thank you for choosing EASTERN SHORE ENT & ALLERGY ASSOCIATES, P.A. for your medical care. Our providers and staff look forward to serving you with the highest quality care.

To help expedite the check-in process, we ask that you complete the enclosed forms. Please be certain to PRINT your answers legibly to all questions, including the yes or no questions on the medical history, and sign all forms. **You will need to bring all of the completed forms, including a current medication list and your most recent insurance cards, with you at the time of your appointment.**

If your health insurance requires a referral, you must contact your primary care physician to obtain the referral **PRIOR** to arriving for your appointment. Health insurance carriers requiring a referral will not authorize us to see you without this written referral.

First-time patients under 18 require a parent or legal guardian to accompany the patient to the first office visit.

With our consent form completed, an adult other than a parent or legal guardian may accompany the patient for follow-up visits. Please understand we will not be able to see the patient without this information. We must have it on file for future visits.

We always make every effort to see our patients as close to their appointment time as possible. However, we are a surgical practice and are subject to emergency circumstances that are beyond our control. We ask for your patience should any delays occur.

You may visit our website at www.easternshoreent.com for other forms and practice information.

Sincerely,

Drs. Kelleher, Kelley, & Deckard

106 Milford Street, Suite 101, Salisbury, MD 21804

Info.esenta@gmail.com

(410) 742-1567, ext. 124 for scheduling

(Please listen carefully to the prompts.)

P.S. To avoid a charge for a NO-SHOW fee, please notify us within 48 hours of your scheduled appointment time that you need to cancel/reschedule your appointment.