



## *VALLEY PAIN SPECIALISTS, PC*

*Steven Mortazavi, M.D.*

*Allen Kao, M.D.*

*Marissa Marion, PA-C*

*Ashley Zimmerman, PA-C*

4250 Fritch Drive  
Bethlehem, PA 18020  
Telephone: (610) 954-9040  
Fax: (610) 954-9093

Dear Patient:

Welcome to Valley Pain Specialists, P.C. We would like to briefly state our office policies to you.

You are required to present your health insurance card at every appointment. If your health insurance requires a referral, this is your responsibility to get from your primary care physician. If you do not have a referral or your insurance cards, you have the option of paying in full up front for your visit or to reschedule your appointment. Copayments, deductibles, and co-insurance are collected at time of check in.

If you have a worker's compensation or automobile accident claim that we are submitting bills to, we require you to present your health insurance card also. If the worker's compensation or automobile claim closes or exhausts throughout your treatment time with Valley Pain Specialists, we will bill your private health insurance. If you do not present your insurance to us, or if you have no other health insurance coverage, the bill becomes your full responsibility. We do not accept claims in litigation. If your claim is in litigation, you are automatically a self-paying patient and will be expected to at check in of each visit. There are no exceptions.

Valley Pain Specialists does not tolerate consecutive cancellations or no-shows. If you cancel an appointment in less than 24 hours of the scheduled appointment time, this is considered a no-show. Patients with (3) or more no-shows will be discharged from the practice.

If you need a prescription refill, you must call (72) hours in advance and leave a message on our prescription hotline. We will notify you when the prescription is ready for pick up (we do not mail prescriptions), and they may only be picked up by someone listed on your consent sheet. There will be no medication changes made over the phone.

Please limit the amount of people you bring with you for your appointment. We have limited space in the waiting area and exam rooms. If you need to bring your children, please make sure they are accompanied by another adult at all times. Children will not be allowed in the exam rooms.

By signing below, you are giving your consent to Valley Pain Specialists to take your photo. This photo will be used solely for identification purposes.

If you have any questions, please contact our Practice Administrator at (610) 954-9040.

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date