



Henein Arthritis & Osteoporosis Center

Dr. Violette Henein

39621 Garfield road • Clinton Township, MI 48038
Phone (586) 226-5555 • Fax (586) 226-4441

Dear patient,

Thank you for choosing the Henein Arthritis & Osteoporosis Center for your healthcare needs, we know you will be pleased with our personal, pleasant and caring atmosphere. You have an appointment on _____ at _____ am / pm with Dr. Henein.

We ask all new patients to arrive **15 minutes** prior to your scheduled appointment to complete paperwork and medical questionnaire.

Important points to remember, please bring:

1. All the **medications** and **medication bottles** that you are currently taking.
 2. Copies of your records from your primary care physicians especially the records of your **most recent visit & lab results** are very important for your initial evaluation.
 3. Your original films or x-rays whenever possible.
 4. Your insurance cards; we need to make copies of them.
 5. A picture ID.
 6. Your referral number from your primary care physician or consulting physician, if your insurance policy requires prior authorization; we will not be able to see you without the referral.
- ❖ Our Physician needs to review copies of your records from your Primary care physician and another specialist if you have seen one, so you can bring the records with you or have them faxed directly to us.
Our fax number is **(586) 226-4441**
 - ❖ We require at least 24 hour cancellation notice so that appointment time may be used by other patients. (**Cancellations or no-shows without sufficient notice may result in a \$25 charge**)
 - ❖ It is our policy to document all cancelled and no-show appointments because of the demand, if you do not show up for an appointment or you cancel an appointment without 24 hours notice on two or more occasions, we may find it difficult for us to continue to serve you.
 - ❖ We invite your comments and any suggestions, we are very excited to serve you and bring the best care you deserve.

Sincerely
Dr. Henein and staff

Enclosed: New patient registration and questionnaire.