New Patient Check List

- ☐ Initial Holistic Health Assessment Intake Form
- ☐ Medication and Supplements Form
- ☐ Daily Diet & Symptoms Log
- ☐ Recent Blood Chemistry is sent
  - ☐ You have provided us the website address, username and password to your online health portal (Preferred option).
  - ☐ You have sent the information yourself.
  - ☐ You have authorized your current provider to send us your past medical records and blood work (Not recommended).
- ☐ Notice of Privacy Practices Information
- ☐ Acknowledgement of Notice of Privacy Practices Information
- ☐ Informed Consent
- ☐ Map
- ☐ New Patient Check List

Questions?

If you have any questions at all, please reach out and we will be happy to help you with anything you need.
Give us a call (919) 848-0200.

See you soon!