

MESBAH OBGYN, PC

Michael C. Mesbah, MD

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Suite 3

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516-794-1500

516-745-1445 – fax

Please note the following office policies:

All patients who fail to show without calling the office prior to their appointment time will incur \$25.00 missed appointment fee. Although we try our best to confirm appointments in advance it is not always possible and remains patient responsibility.

All forms/letters requested by the patient for the office to write or fill out take a significant amount of time for the staff to complete. Therefore, there will be a \$5.00 charge per form/letter.

Co-pays are due at time of visit.

Thank you for your understanding.

Dr. Michael Mesbah and Staff

Patient Name: _____

Patient Signature: _____

Date: _____