



HINSDALE

ASTHMA AND ALLERGY CENTER

105 E 1st Street Suite 203 Hinsdale IL 60521

Tel. 630-323-5522

Fax. 630-323-5524

General Office Policies:

Our office policies are in place to ensure quality and efficient healthcare services and patient care, patient comfort and respect, and to follow guidelines as legislated by HIPAA, the AAAAI, and your insurance company.

- In regards to patients' allergies, *no food or drinks* are allowed in the lobby.
- Please be respectful and refrain from using cologne, perfume, or lotion in the lobby. Also, prior to the appointment, please keep use of cologne, perfume, or scented lotion to a minimum.
- Parents or legal guardians are required to attend all appointments and injection visits for those patients who are 17 years of age and younger, unless there is a letter on file from parent/guardian specifically authorizing visits without the present.
- When placed on allergen immunotherapy, you must make an appointment prior to your injections.
- When an allergy injection is administered, *it is mandatory to wait in the in the waiting room for 30 minutes* to ensure that no reaction takes place. This is a guideline set forth by the American Academy of Asthma, Allergy and Immunology.
- When on allergen immunotherapy, an office visit is required every 3-4 months to properly assess treatment progress.
- An appointment is required to obtain lab results. Due to HIPAA, lab results cannot be discussed over the phone.
- 5 business days' notice is required for prescription refill requests. We do not mail prescriptions. An appointment within 6 months is required for a prescription refill. Refill requests are at the determination of the provider.
- It is HIPAA and federal policy that we provide medical records within 30 days after the initial request. *As a courtesy to you, our office will strive to provide you with your medical records prior to 30 days after the initial request. The medical records need to be reviewed by a medical professional prior to release. The cost is as stated by www.hhs.gov
- For your child's coordination of care and proper medical documentation, school form requests will require an office visit. Please refer to our school form policy. The school form will be reviewed and filled out with you, your child (if age appropriate), and with the physician.

If you have any questions about these policies or need further clarification, please speak with the office staff. We welcome you to our office and look forward to treating you and your family!

Signature of Responsible Party or Parties: _____

Date _____