

**PULMONARY MEDICINE ASSOCIATES**

**First Visit Check List**

**PLEASE TAKE THE TIME TO REVIEW THIS CHECK LIST, SO YOU ARE WELL PREPARED FOR YOUR APPOINTMENT. WE LOOK FORWARD TO SEEING YOU SOON.**

- **NEW PATIENT PAPERWORK**
- **LIST OF ALL PHYSICIANS INVOLVED IN YOUR CARE SO WE CAN OBTAIN PRIOR RECORDS AND LABS**
- **X-RAY FILMS (IF APPLICABLE)**
- **MEDICATION LIST WITH DOSAGE, OR JUST BRING ALL MEDICATION YOU ARE TAKING**
- **INSURANCE CARD(S)**
- **INSURANCE REFERRAL FROM PRIMARY CARE DOCTOR (IF APPLICABLE)**
- **AND MOST IMPORTANTLY ... YOU.**

**THANK YOU FOR YOUR COOPERATION  
PMA STAFF**