The Minniti Center

Medical Oncology & Hematology

174 Democrat Road

Mickleton, NJ 08056

(856) 423-0754

Fax (856) 423-7508

Dear _____,

Enclosed, please find forms that you will need to fill out and bring with you along with any insurance cards, photo identification and a complete list of current medications, for your visit in our office on:

_____.

Please note: •If your insurance plan requires a referral, please contact your primary care physician to obtain it prior to your appointment.

•**PLEASE NOTE**: THERE WILL BE A CHARGE IF YOU FAIL TO NOTIFY THE OFFICE THAT YOU WILL NOT BE KEEPING YOUR APPOINTMENT- RESULTING IN A **NO CALL/NO SHOW**. WE APPRECIATE AT LEAST 24 HOURS NOTICE FOR ALL CANCELLATIONS AND RESCHEDULES. THANK YOU!

If you have any questions, please feel free to call the office at (856) 423-0754.