



Denise B. Pecht, M.D., F.A.C.O.G  
Gregory T. Fountain, M.D., F.A.C.O.G  
Julie Lupa, WHNP-B-C

Our practice is committed to providing individualized care for patients with interstitial cystitis/painful bladder syndrome/pelvic floor dysfunction. We recognize that each patient has unique concerns, expectations, and symptoms. Our goal is for you to feel better and for you to learn how to manage your symptoms.

Your consult appointment will be scheduled with me, Dr. Denise Pecht. At that appointment we will review your history, perform a physical exam, formulate a plan of care, and provide you with educational materials. Your plan of care will be individualized for you and will require your input and participation. We will make every effort to check your benefits prior to your visit but this is not always possible. (Please see Financial Policy.)

If you need to cancel or reschedule this appointment, you will need to call at least 24 hours in advance in order to avoid a charge of \$100. You will be required to pay this before another appointment is made. This charge is not covered by your insurance.

In order to make the best use of your consult appointment, we are asking you to do the following:

- If you are not already a patient with our office, register as a new patient through the **Patient Portal** or complete the **Patient Information form** and return it to us at least 2 days prior to your scheduled appointment.
- Complete the **Medical History-Consult form** (included in this packet of information or available on our website) and return it to us at least 2 days prior to your scheduled appointment.
- If you have records for us to review, we will need those at least 2 days prior to your scheduled appointment. You can download a **Request for Medical Records form** from the website or contact us if you need assistance.

If we do not receive the information as requested, your appointment may need to be rescheduled.

Subsequent visits will be scheduled based on the plan of care. Follow up visits are an important component of your care. (Please refer to the Financial Policy regarding failure to cancel or reschedule these appointments.)

Anytime that you need to schedule an additional appointment, please let the schedulers know that you usually see Evie. That will allow you to be scheduled appropriately.

We look forward to working with you.

Sincerely,

A handwritten signature in black ink, appearing to read "Denise Pecht", with a long horizontal line extending to the right.

Denise Pecht, M.D.