



Northwest  
United  
Urology, LLC

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Date of Appointment: \_\_\_\_\_  
Time of Appointment: \_\_\_\_\_  
Name of Doctor: \_\_\_\_\_

Dear Patient:

Enclosed please find patient information forms. In order to collect accurate information, please complete these forms before visiting our office, bring them with you the day of your appointment and present them to the receptionist in order to check in for your appointment. Please arrive prior to the time of your scheduled appointment in order to update your medical information. If you are late to your scheduled appointment, your appointment may need to be rescheduled.

Please present your insurance card at the time of your appointment. If you are an HMO insurance member or any other insurance holder requiring a referral, please provide our receptionist with your paper referral or your insurance referral number. Our office will file PRIMARY & SECONDARY insurance claims if a card is presented at the time of service. If you are not a member of a qualifying insurance plan, payment is requested at the time services are rendered; payment plans are available upon request. We file ALL MEDICARE claims for our patients within one year of date of service and we DO accept Medicare assignment for qualifying individuals.

Our office is located at 2101 S. Arlington Heights Road, Suite 150, Arlington Heights, IL 60005. The location is approximately one block south of the intersection of Arlington Heights Road and Golf Road on the east side of the street, across from Dunkin Donuts.

Please call us if you have any questions. Thank you for trusting us with your urological care.

Sincerely,

NORTHWEST UNITED UROLOGY, LLC