Karande & Associates, S.C. doing business as



Subspecialty Care in Reproductive Medicine

1585 N. Barrington Road
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Hoffman Estates, IL 60169
847-884-8884 FAX 847-884-8093

Dear Patients:

All patients pursuing treatment must provide the following documentation at the initial appointment:

- 1) Pap Smear Report performed within one (1) year
- If you are an HMOI patient, you need a global referral from your primary care physician and the results of your Gonorrhea and Chlamydia test prior to initial appointment
- 3) The results of your Rubella / Varicella Screens
- 4) The results of your Blood Group/ Rh Factor tests
- 5) Copies of your (female) records from OB/GYN including any lab work, ultrasounds, hysterosonograms and/or preliminary infertility workup done by OB/GYN and (male) semen analysis of your partner

I have read and understand that it is my responsibility to provide InVia Fertility Specialists with the above information prior to starting treatment.

Failure to do so could delay attempts in proceeding with infertility treatment.

By signing below I confirm that I have read this form and understand all that it entails.

Signature	Date
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