

CONNECTICUT GASTROENTEROLOGY ASSOCIATES, PC.

AMER SKOPIC, DO.

18 Haynes St, Suite A

MANCHESTER, CT 06040

TEL. 860-533-0008

FAX 860-533-0019

DIRECT BOOKING FOR SCREENING COLONOSCOPY

FAX ALL INFORMATION TO 860-533-0019 ATTENTION: Brittany (tel. 860-533-0008X102)

PATIENT NAME: _____

DOB: _____

BEST CONTACT NUMBER: _____

INSURANCE: PLEASE ATTACH DEMOGRAPHIC SHEET AND COPY OF INSURANCE CARD (FRONT AND BACK)

PMH:

PSURG:

MEDICATIONS:

ALLERGIES:

PLEASE NOTE THESE PROCEDURES WILL BE BOOKED IN MANCHESTER HOSPITAL, BLOOMFIELD
OUTPATIENT SURGERY CENTER OR WINDSOR ENDOSCOPY CENTER. PLEASE NOTE THAT IF PATIENT BMI
IS OVER 40, PROCEDURE WILL BE DONE AT MANCHESTER HOSPITAL