

45 Walpole Street – Suite 6 Norwood, MA 02062

Tel: (781) 769-1646	Fax	: (781) 769-4696
Initial Consult on: Mon/Tue/Wed/Thu	@	with Dr. Mavani
Dear,		
Please complete the enclosed registration paperw you to your initial interview. Please ensure <u>all</u> require signatures are signed and dated prior to y	forms are comp	oleted and those that
Please bring your insurance card(s) and a valid ph	noto ID with you a	at this time as well.
Please note that if you have a co-payment, it is du accept cash, check, debit, and credit card.	e at time of appo	intment. We
The office is located at 45 Walpole Street in Norwo this is on the lower level (<i>please use street addre</i> Please try to arrive 10-15 minutes before your sch additional paperwork.	ess when using	directions).
lf you require assistance using stairs (6-7 stair to ensure appropriate arrangements are made.		ne office immediately
We look forward to seeing you,		
Sincerely,		

Emily Herzog, BS Office Manager

Email: office@nepvneuro.com