

Associates In Internal Medicine, P.C.
241 East 86th Street Suite 2D, New York, NY 10028
234 Central Park West, New York, NY 10024

Influenza Vaccination

Medical Manager #: _____

Date: _____

Patient: _____
(PLEASE PRINT CLEARLY)

1. People that are allergic to eggs are not able to have the influenza vaccine. Are you allergic to eggs? _____

Many insurance companies pay for the influenza vaccination, however, several do not. It is much too time consuming to research every plan that we participate in. Therefore, we will send our initial bill to your insurance carrier. In the event that the claim is denied, please be advised that the fee for the influenza vaccination is \$30 plus the administration fee of \$20.

Thank you,

Assoc. in Internal Medicine, P.C.

(Signature of Patient)

(Date)