

RESTON MEDICAL ASSOCIATES, LTD.

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New Patient

Update

Gwilym Parry, MD.

Tessa Cholmondeley, MD.

I wish to be contacted in the following manner (check all that apply):

The BEST number to reach me is: _____

Home Phone: _____

Okay to leave a detailed message

Leave a message with call back number only

Work Phone: _____

Okay to leave a detailed message

Leave a message with call back number only

Cell Phone: _____

Okay to leave a detailed message

Leave a message with call back number only

Okay to leave details about my test results/appointments and/medical condition with:

My Spouse (name) _____

Other Family Member (name) _____

Written communication:

Okay to mail to my home address

Okay to fax to this number _____

Okay to send emails to _____

Patient Name: _____

Patient Signature: _____

Date: _____