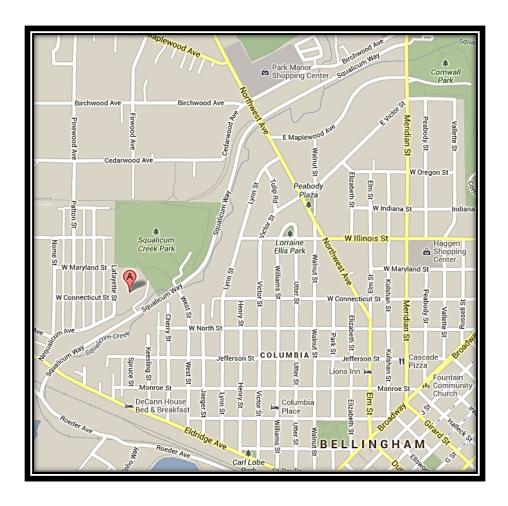


Dear		
You are scheduled with:	on	@
		(Check in)
 Please complete these forms and bring the 	em with you to your	scheduled
appointment. You may also email them to	contactus@dlcnw.co	om.
 Patients who are late and/or have not co 	mpleted forms may	have to reschedule.
Requesting Release of Records for all rele	evant prior visit notes	, pathology, and labs, <u>in</u>
advance, will allow your provider to comp	olete a more comprel	nensive visit.
 Please have your previous dermato 	ologist transfer your n	nedical records via fax:
360.676.0377.		
Bring list of all medications, including over	r-the-counter.	
 Bring insurance card(s), photo ID, mask, 8 	k co-pay.	
Bring proof of Covid-19 vaccination if bot	h injections complete	ed.
 24 hours' notice is required to change or 	cancel appointment;	72 hours preferred.

○ No show fees range from \$100-\$250.

We look forward to serving you. Please call us with any questions. **360-676-1470**



www.dlcnw.com 905 Squalicum Way, Ste. 101

- From downtown Bellingham: Follow Guide Meridian N. At intersection in front of the entrance to Cornwall Park turn L on <u>Squalicum Way</u>. Follow for 1.2 miles towards the waterfront & turn R into gated complex. If you reach the waterfront you have gone too far.
- From N Bellingham: Follow Guide Meridian S. to the intersection in front of the entrance to Cornwall Park, take a R on Squalicum Way & follow 1.2 miles towards the waterfront. Take R into gated complex.
- From I-5: Take exit 256. Head south on Guide Meridian to the intersection in front of the entrance to Cornwall park then take a R onto Squalicum WAY (2nd RIGHT at the two lights back to back) & follow 1.2 miles towards the waterfront. Take a R into gated complex.
- Notes: We are west of Guide Meridian, not by the Hospital and not on Squalicum
 PARKWAY. Note: There is no street access from Northwest Ave to Squalicum Way.