

Dear

Thank you for allowing me to participate in the medical care of your spine or musculoskeletal problem. As a Doctor of Osteopathic Medicine (D.O.), my medical training emphasized the musculoskeletal system – the body’s interconnected system of nerves, muscles and bones that make up two-thirds of your body mass. This training provides me with a better understanding of how an illness or injury in one part of the body can affect other parts (American Osteopathic Association). I am a Physiatrist which is a medical doctor that treats patients of all ages with diverse problems ranging from low back sprains to complex disorders, such as spinal cord injury using a comprehensive approach to treat the entire body, not just symptoms. Similar to other types of spine specialists, physiatrists take a medical history, perform a physical and neurological examination, order X-rays or other imaging studies, prescribe medications, and perform spinal injections. I specialize in conservative management of spinal disorders (neck and low back pain), interventional procedures for pain management, and non-surgical management of joint pain.

Please see these two websites for more information on a Doctor of Osteopathic Medicine (D.O.) and Physiatry or Physical Medicine and Rehabilitation:

<http://doctorsthatdo.org/difference>

<http://www.aapmr.org/about-physiatry>

As a new patient to my practice, please review the following information to make your clinic visit as smooth and helpful as possible.

Checking in for your visit:

- Duxbury office: 95 Tremont Street.
- Sandwich office: 290 Rt. 130, behind “The Sandwich Taverna” restaurant, next door to Forestdale Post Office (if using GPS enter Forestdale as the city).
- Plymouth office: 41 Resnik Road.
- **Referral:** Most insurance plans require a referral to see a specialist. Please check with your insurance carrier to see if this applies to you. If so, it is very important that you get a referral from your primary care physician prior to your appointment. It is the patient’s responsibility to make sure that this referral is in place. If you need a referral and do not have one, your insurance will not pay for your visit and I will not be able to see you. Also, if you change insurance plans at any time while you are under my care you may need to obtain a new referral.
- **Co-payments:** Per Plymouth Bay Orthopedics policy, I will be unable to see you if you do not make your co-payment.

Imaging

- **X-ray:** If your X-rays were done at Beth Israel Deaconess Plymouth or at our facility, I will be able to review these images online. If you had imaging elsewhere, please bring a copy of those images and the report to your appointment.
- **MRI's and CT Scans:** If you had an MRI or CT scan done at Beth Israel Deaconess Plymouth or at Shields, I will be able to review these images online. If you have had imaging elsewhere, please bring a copy of those images and the report to your appointment. I will not be able to review them online.

Please ensure that you have the images as this will be most important to review with you during your appointment, rather than having just the report available. To obtain your images, please contact the radiology department at the location where you had them taken in order to request a CD copy.

Documents to bring:

- Driver's license or some other form of photo identification, such as a passport.
- Health Insurance Card(s).
- Reports
 - If you have had any prior surgeries on your spine, please obtain a copy of the operative report from the surgeon's office so I know exactly what was done
 - If you have had any injections, please obtain a procedure report so I know exactly where the injection was given.
 - If you have had any physical therapy, please obtain a copy of the therapist's report and bring this to your appointment as well.

Institutions with which I am not affiliated will not release any patient information directly to me (violation of privacy laws), so I need you to obtain these documents and bring them with you.

Please find enclosed a few documents to fill out prior to your appointment to help acquaint you with my practice.

- Confidential Questionnaire
- Pain Diagram (please use colored markers to complete)
- Pain Management Agreement

Your appointment is scheduled for:

Date:

Time:

Office: Duxbury/Sandwich/Plymouth

I look forward to working with you!

Brett Teran, D.O.

Physiatrist (Physical Medicine and Rehabilitation Specialist)

Plymouth Bay Orthopedic Associates

www.pbortho.com

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