

PRO HEALTH GROUP, INC. **NEW PATIENT PACKAGE**

Dear Patient,

Welcome and thank you for contacting our office. We look forward to helping you along your path toward wellness. For your reference, the following summarizes our updated office policies, services and fee schedules. Please do not hesitate to contact our reception with any questions.

PRACTICE GUIDELINES

UNDERSTANDING THE CURRENT POLITICAL ARENA

Lyme disease and associated diseases are a complex and puzzling problem that scientists, practitioners and patients are only beginning to understand. Tremendous controversy surrounds the diagnosis and treatment of chronic Lyme disease. For example, many physicians and health agencies deny even the existence of an entity called “chronic Lyme” and disagree with the practice of long-term antibiotic use. In contrast many physicians conclude from scientific studies and diagnostic tests that the presence of the bacteria Bb is consistent with symptoms of “chronic Lyme” and therefore, does exist. Secondly, physicians from both sides of the argument have drawn conflicting conclusions from a recent peer reviewed study that addresses the question of whether or not the use of long-term antibiotics alleviates “chronic Lyme” symptoms.¹ Finally, the Connecticut Attorney General is prosecuting a case against the IDSA for anti-trust violations related to their publication of treatment guidelines that discourage the treatment of “chronic Lyme” and recommend against even testing symptomatic patients who do not reside in historically Lyme endemic areas.

This environment has driven physicians into offering one of two standards of care:

1. Some physicians rely on the narrow surveillance case criteria of the CDC for clinical diagnosis even though the CDC cautions against this approach. These physicians will fail to diagnose some patients who actually have Lyme disease. As a result, many patients go undiagnosed or misdiagnosed as having autoimmune diseases, fibromyalgia, MS, ALS, chronic fatigue syndrome, depression, anxiety, etc., or patients may find that their doctor relies upon biased or misinterpreted information and/or avoids treatment that we have found successful with our patients.
2. Other physicians use broader clinical criteria for diagnosing Lyme disease rather than the CDC criteria along with diagnostic tests that detect the presence of Lyme specific antibodies or DNA. These physicians understand that infected tick populations have expanded beyond traditional borders. While diagnostic certainty is being debated in the medical community, some physicians believe it is better to err on the side of treatment because of the serious consequences of failing to treat active Lyme disease. These physicians sometime use the clinical responsiveness of a patient to a specific treatment to assist in their diagnosis. It is also true, however, that fibromyalgia, lupus, rheumatoid arthritis, etc., often exist alone, without any relation to Lyme disease, Babesiosis, Ehrlichiosis or Bartonellosis. In these cases, a rheumatologist or neurologist may be best suited to manage a patient’s care.

This office will make every attempt to distinguish between Lyme disease and other conditions through scientific and complementary methods. We will inform you when we believe your symptoms are not Lyme-related. A proportion of patients who come to our practice indeed do not have Lyme disease and we do not recommend they undergo treatment for Lyme.

DIAGNOSTIC PRACTICES AND TOOLS

Lyme is a clinical diagnosis. We will utilize a combination of patients symptoms (current and historical), clinical response to various medicines, and lab tests to guide us in our diagnosis. Diagnosis is more than just concluding whether or not you have Lyme or another Tick-Borne disease. It also includes understanding the current state and severity of the disease and confounding problems such as gut dysbiosis, viral loads, hormonal dysregulation, toxic exposure and hypersensitivities among other issues.

SERVICES PROVIDED

BILLING

All fees are due at the time of the appointment (including follow-up appointments, phone calls, IV services, and supplement packages). We accept all credit cards and personal checks. If you pay in cash, you must have the exact amount as we do not have change. We do not bill insurance. We do not bill Medicare and are not Medicare providers (see "Insurance"). Patients are responsible for full payment at the time of service.

NEW PATIENT VISITS

Appointments are dedicated to assessing patient status with a thorough review of the patient history, current symptoms, and lab tests. The objective of this visit is to establish or work toward a diagnosis, summarize treatment options and help the patient understand what is entailed regarding length of treatment and medications/side effects. The practitioners will work with each new patient to select the approach that balances both patient constraints and treatment effectiveness.

FOLLOW UP VISITS

Treatment of Tick-Borne diseases requires close monitoring of the disease response to specific medications. Appointments are designed to make assessments of patient progress and medication effectiveness. The practitioners may require a patient to visit before any different medication can be prescribed. Frequency of follow ups vary, but are generally every 4 to 12 weeks, depending on each individual case.

LAB REVIEWS

This appointment is specifically designed to enable an in-person discussion about your lab results, implications on the treatment plan, details on how to implement the plan and what can be expected while taking the various medications in the regimen.

PHONE CONSULTATIONS

We have many patients who live out of state or out of the country, which makes frequent trips to the office cost prohibitive. To help reduce the cost, phone consultations will be available. Note, an office visit may still be required three to four times per year (with phone consultations in between) in order to continue writing prescriptions. Fees are billed for the length of the call.

NEW PATIENT VISITS

Appointments are dedicated to assessing patient status with a thorough review of the patient history, current symptoms, and lab tests. The objective of this visit is to establish or work toward a diagnosis, summarize treatment options and help the patient understand what is entailed regarding length of treatment and medications/side effects. The practitioners will work with each new patient to select the approach that balances both patient constraints and treatment effectiveness.

FAMILY PRACTICE

Appointments are available for family members who wish to get tested for Lyme and co-infections.

ANTIBIOTIC INJECTIONS

When patient's treatment includes antibiotics, patients may benefit from shots of Bicillin, Invanz, or Rocephin. The practitioners will make the determination during your visit whether or not this would be recommended for you at that time.

IV SERVICES

We provide our patients who require IV medications and supplements the opportunity to have the medications and supplements administered at our office. The practitioners will make the determination during your visit whether or not this would be recommended for you. We also provide PICC line dressing changes and Port access/flush. Fees vary for IV services and are due at the time of the appointment.

PRESCRIPTION AND REFILLS

Refills will only be granted when there are extenuating circumstances. Patients will be required to have either a phone consult or office visit at the end of each 4 to 6 week period at which time the treatment effectiveness will be assessed and a new prescription will be written if continued treatment is necessary. If no appointments are available, you may be given a partial new / refill prescription until your next appointment. In the case where a refill has been granted, we will call your pharmacy with the refill information. Please allow 72 hours for processing the refills. Plan ahead - requesting refills after you are out of medication should be avoided.

DISABILITY BENEFIT APPLICATIONS

These are generally not completed by our office. Your primary care physician should assist in the completion of these forms.

OFFICE POLICIES

NEW PATIENTS

New Patients will need a first follow-up appointment within 6 weeks if medication is prescribed. The first weeks of treatment are often the most difficult and unsettling. Many symptoms change rapidly, often necessitating an exam and detailed explanation.

SCHEDULING APPOINTMENTS

Patient visit and phone consultations are by appointment only. Please contact our office to schedule all appointments including IV services.

INSURANCE

Due to the limited resources of this office, we are not able to bill insurance directly for the appointment fees. However, we will provide patients with a superbill (which includes CPT and diagnosis codes) following each visit so you can bill your insurance provider directly. **We are not Medicare providers, we do not bill Medicare, superbills cannot be submitted to Medicare.** We recommend you contact your insurance plan for any questions related to submitting a superbill for reimbursement.

CANCELLATION POLICY

Our office hours book up quickly and we often are forced to turn away sick patients due to a heavy schedule. Please be considerate of other patients and contact us in advance should you need to cancel your appointment. New patient appointment cancellations must be received by our office reception 2 business days before the date of your appointment or a cancellation fee will apply. Follow up appointments and phone consultations cancellations must be received by our office 48 business hours before consultations or a cancellation fee will apply. Cancellations must be phoned or emailed to assistant@prohealthgroupinc.com.

PRIMARY CARE PHYSICIAN REQUIREMENTS

All patients are required to have a primary care physician to manage all non-tick-borne related conditions. We are not a primary care office.

ELECTRONIC DEVICES AND CELL PHONES

Cell phones must be silenced during your time at the practice. If you must make or receive a call, please remove yourself from the waiting room or ozone room.

If you would like to listen to your device, we ask you to use headphones, so that you do not disturb other patients.

RECORDS, LETTERS, & FORMS

To request medical records please sign the "Medical Records Request Form" that is located in the New Patient Packet. Please allow for 7 business days for us to gather your information and send it to the requested party. We charge a minimum fee of \$40 (depending upon the size of your chart).

Occasionally, we are asked to copy charts and send records to other physicians, insurance companies, etc. or we are asked to write letters on behalf of patients. We will comply with these requests in a timely basis. Please allow for 7 business days for us to complete letters and forms. We charge a minimum fee of \$40 for copying charts, writing letters, and completing paperwork. Charges will vary depending upon the size of the chart and the complexity of the correspondence requested.

NOTICE OF PRIVACY PRACTICES

We are required to print an updated copy of our notice of privacy practices. A copy is enclosed with this packet for you to keep for your records.

WHAT YOU NEED TO KNOW ABOUT OUR PRACTICE

We will make every attempt to respond to your questions in a timely manner. We understand that it can be frustrating waiting for a response but please be assured that we will get back to you as soon as possible. If you experience any of the following events, send an email to assistant@prohealthgroupinc.com or call (310) 504-3700.

- An allergic reaction that could be caused by your medication.
- A medical emergency that may require you to be hospitalized.
- A severe neurological incident, such as a stroke.
- Severe diarrhea that goes unresolved after following the practitioner's advice.
- A PICC line emergency, such as clotting or infection.

ALWAYS CALL 911 FIRST OR GO TO THE NEAREST HOSPITAL IF YOU EXPERIENCE A LIFE-THREATENING EMERGENCY. Our office can later be contacted regarding the details of your status.

The office is not always able to answer every received call due to high volume of calls that the office receives on a daily basis.

We also know from experience that we are better able to reply quickly when patients leave short and clear messages containing the following information:

- A clear statement of your first and last name - please spell both.
- A brief summary of the issue / problem.
- A brief summary of what you need our office to do.
- A clear statement of your call back number.

Please help us improve our turn-around time by using the guideline when you call the office. Please always leave a call back number even if you think we have it. Complicated questions should be sent as an email rather than leaving a voicemail.

Threats, aggressive behavior or other forms of "Lyme rage" against a practitioner, staff, or other patients will not be tolerated. Anyone displaying this behavior will receive a written warning. Subsequent offence will result in removal from the practice. We take this very seriously.

The practice does NOT prescribe Schedule II narcotics such as Morphine, Oxycodone, etc. Prescriptions for other scheduled medicines will require an office visit. This includes certain pain medicines, muscle relaxants, and sleep aids.

Prior to your office visit, we find it helpful if you can gather as much information as possible regarding your illness and past medical history. Please put together a chronological diary beginning from the time you first became ill to present. List in order, the onset of symptoms, tests completed (blood tests, imaging, etc.) and in order, treatment received, including the name of the medications, dose and the dates or duration of therapy, plus any comments on these treatments affected you. Please bring copies of your medical records with you. Please provide us with names and phone numbers of all physicians who have seen you in the past and all physicians who are currently seeing you; both your primary care physician and the physician who is currently treating you for Lyme (if any).

PATIENT EXPECTATIONS AND GUIDELINES FOR TREATMENT

DURATION OF LYME DISEASE BATTLE

Lyme disease treatment can vary from patient to patient. In general, the more time that has elapsed from infection to treatment, the longer the patient will require treatment. Please see the website ilads.org for further information.

SIDE EFFECTS, WORSENING OF SYMPTOMS

Many people will have a flare-up of symptoms when beginning treatment. This reaction, referred to as a Jerisch-Herxheimer (Herx), is quite common and can last several days. We will be careful to distinguish between side effects of medications, treatment failure, and symptoms of a herx reaction. Please contact our office if symptoms should arise or if you need guidance on how to manage such symptoms.

TYPES OF TREATMENT

Types of treatment include oral antibiotics and supportive medicines, intramuscular injections, and intravenous infusions. Herbal supplements, homeopathic and drainage remedies and other modalities are often employed depending upon the situation. There are advantages and disadvantages to each of the various types of treatment. These will be discussed during your office visit if they apply to you.

WHAT WE EXPECT OF PATIENTS

Patients must play a large role in their own fight against Lyme disease. The following is a short list of expectations we have for all patients within the practice:

- Patients who smoke must agree to quit smoking or remain actively involved in a smoking cessation program.
- Some nutritional supplements are an integral component in the treatment, and therapies such as acidophilus are essential while you are taking antibiotics. Patients must do their part in protecting themselves against the harmful side-effects of long-term antibiotics.
- Alcohol is detrimental to patients with Lyme disease and interacts with many medications. Alcohol usage should be limited.
- Please discuss with the practice any plans of dental work, surgeries, or steroid use. Your treatment may be affected.
- We are unsure of the extent that the disease may be horizontally or vertically transmitted. In general, we do not recommend treatment for partners prophylactically.
- Patients who are being treated with intravenous (IV) antibiotics **MUST** be seen by doctor **every 4 weeks** or as directed by the doctor.

TEST RESULTS

When the doctor orders lab tests, our office keep track of the tests that were ordered and the testing lab. Each lab and each test have different turn-around times and our office has no way of accurately predicting when lab results will be submitted to our office. We understand that patients are often anxious to receive their results for a variety of reasons. Becoming familiar with our internal lab process is the best way to ensure that you understand our office capabilities.

Our internal process is as follows:

- Patient leaves appointment with written orders for tests at one or more labs.
- Patient has blood or other samples collected and mailed directly to the testing lab(s) or has blood drawn in our office and sent to the appropriate lab(s).
- Our office receives a faxed and/or mailed copy of the lab result from each separate lab and often for each separate test as the results become available.
- The practitioners review all labs results and make notations if the results are abnormal.
- Patients are contacted by phone if results are out of normal range that may require an immediate intervention. **We do NOT call back** patients with normal results – these will be discussed at your next appointment.
- If patients require a copy of any given lab report, they must call our office and specify the lab test and the test date for the results they need.

ANTIBIOTIC DOSES AND SIDE EFFECTS

The use of medicine in general and antibiotics in particular have several side effects and can lead to possible complications. These include, but are not limited to, allergic reactions, stomach and intestinal disorders, antibiotic resistant bugs which can turn otherwise mild infections into catastrophic events, nausea, rashes, visual or hearing loss, drug interactions, liver and kidney damage, nerve damage, immune system dysfunction, and yeast infection. If you are diagnosed with Lyme disease and choose to receive antibiotic treatment, you are accepting and assuming the risk. Several techniques will be used to avoid these complications, but sometimes they are unexpected and unavoidable.

NEW PATIENT PACKAGE

Dear Patient,

Welcome and thank you for contacting our office. We look forward to helping you along your path toward wellness. For your reference, the following summarizes our updated office policies, services and fee schedules. Please do not hesitate to contact our reception with any questions.

PRACTICE GUIDELINES

UNDERSTANDING THE CURRENT POLITICAL ARENA

Lyme disease and associated diseases are a complex and puzzling problem that scientists, practitioners and patients are only beginning to understand. Tremendous controversy surrounds the diagnosis and treatment of chronic Lyme disease. For example, many physicians and health agencies deny even the existence of an entity called “chronic Lyme” and disagree with the practice of long-term antibiotic use. In contrast many physicians conclude from scientific studies and diagnostic tests that the presence of the bacteria Bb is consistent with symptoms of “chronic Lyme” and therefore, does exist. Secondly, physicians from both sides of the argument have drawn conflicting conclusions from a recent peer reviewed study that addresses the question of whether or not the use of long-term antibiotics alleviates “chronic Lyme” symptoms.¹ Finally, the Connecticut Attorney General is prosecuting a case against the IDSA for anti-trust violations related to their publication of treatment guidelines that discourage the treatment of “chronic Lyme” and recommend against even testing symptomatic patients who do not reside in historically Lyme endemic areas.

This environment has driven physicians into offering one of two standards of care:

PRO HEALTH GROUP, INC.
NOTICE OF PRIVACY PRACTICES

Effective Date: April 2003
Required by Federal Regulation 45 CFR 164.520

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN ACCESS THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

OUR PLEDGE REGARDING YOUR HEALTH INFORMATION

We understand that information about you and your health is confidential. We are committed to protecting the privacy of this information. Each time you visit with the doctor(s) in person or via a phone consultation, we create a record of the care and services you receive. We need this record to provide you with quality care and to comply with legal requirements. This notice applies to all of the records of your care created by any of our health care personnel or your physician. This notice describes your health care information privacy rights and the obligations Pro Health Group, Inc. has regarding how we may use and disclose your health information.

OUR RESPONSIBILITIES

Federal and California law makes us responsible for safeguarding your personal health information. We must provide you with this notice of our privacy practices and follow the terms currently in effect.

Changes to this notice: We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for health information we already have on file about you as well as any information we receive in the future. We will post a copy of the current notice throughout our organization. A copy of this notice will be available at the office location of your doctor visit.

HOW WE MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU

The following categories describe different ways that we use your health information within the practice of Pro Health Group, Inc. . We have not listed every use or disclosure within the categories below, but all permitted uses and disclosures will fall within one of the following categories. In addition, there are some uses disclosures that will require your specific authorization.

Treatment: Your health information may be used to provide or coordinate our medical treatment and services. We may disclose health information about to doctors, nurses, technicians, medical students, interns and other allied health personnel who are involved in providing for your well-being during your visit(s) with us. We also may communicate information to another health care provider for the purpose of coordinating your continuing care.

Payment: We may use and disclose your information for billing and to arrange for payment from you, an insurance company, a third party or a collection agency. This also may include the disclosure of health information to obtain authorization for treatment and procedures from your insurance plan.

Health Care Operations: Uses and disclosures of health information are necessary to operate our practice and to make sure all of our patients receive quality care. We may use and disclose relevant health information about you for health care operations. Examples include quality assurance credentials, administrative activities including Pro Health Group, Inc. 's practice and business planning and development, customer service activities including investigation of complaints, and certain marketing activities such as health education options for treatment and services.

Business Associates: There are some services provided in our organization through contracts with business associates. Examples of business associates include accreditation agencies, management consultants, quality assurance reviewers, and billing and collection services. We may disclose your health information to our business associates so that they can perform the job we've asked them to do. To protect your health information, we require our business associates to sign a contract or written agreement stating they will appropriately safeguard your health information.

Appointment Reminders: We may use and disclose health information to contact you as a reminder that you have an appointment for treatment or medical care within our organization. These appointment reminders may be in the format of a phone message, a text message, a postcard or a letter.

SPECIAL SITUATIONS THAT DO NOT REQUIRE YOUR AUTHORIZATION

California and Federal law permits the following disclosures of your health information without any verbal or written permission from you:

Organ and Tissue Donation: We may release health information to organizations that handle organ, eye or tissue procurement or transplantation.

Research That Does Not Involve Your Treatment: When a research study does not involve any treatment, we may disclose your health information to researchers after an Institutional Review Board has reviewed the research proposal, established appropriate procedures to ensure the privacy of your health information, and waived the need for your authorization.

Military and Veterans: If you are a member of the armed forces, we may release health information about you as required by military command authorities.

Averting a Serious Threat to Health or Safety: When necessary, we may use and disclose health information about you to prevent a serious threat to your health or to the health and safety of another person or the public.

Health Oversight Activities: We may disclose health information to a health oversight agency for activities authorized by law. These oversight activities include audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor health care systems, government programs and compliance with civil rights laws.

Public Health Activities: We may disclose health information about you for public health activities. These generally include the following:

- To prevent or control disease, injury or disability
- To report births and deaths
- To report child and adult abuse or neglect
- To report reactions to medications, problems with products or other adverse events
- To notify people of recalls of products they may be using
- To notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition

Lawsuits and Disputes: If you are involved in a lawsuit or dispute, we may disclose health information about you in response to a court or administrative order. We may disclose health information about you in response to a subpoena, discovery request or other lawful process by someone else involved in the dispute.

Law Enforcement: We may disclose health information if asked to do so by law enforcement officials for the following reasons:

- In response to a court order, subpoena, warrant summons or similar process.
- To identify or locate a suspect, fugitive, material witness or missing person.

- To identify the victim of a crime if, under certain circumstances, we are unable to obtain the person's authorization.
- To release information about a death we believe may be the result of criminal conduct.
- To provide information about criminal conduct at our facility.
- In emergency circumstances, to report a crime, the location of the crime or victims, or the identity, description or location of a person who committed the crime.

Coroners, Medical Examiners and Funeral Directors: We may disclose health information to a coroner or medical examiner. This may be necessary to identify a deceased person or determine the cause of death of a person. We also may release health information about patients at our facility to funeral directors as necessary to carry out their duties.

National Security and Intelligence Activities: We may disclose health information about you to authorized federal officials for intelligence, counterintelligence and other national security activities authorized by law.

Inmates: If you are an inmate of a correctional institution or under custody of a law enforcement official, we may disclose health information about you to the correctional institution or the law enforcement official. This is necessary for the correctional institution to provide you with health care to protect your health and safety and the health and safety of others, and to protect the safety and security of the correctional institution.

Legal Requirements: We will disclose health information about you without your permission when required to do so by Federal or California law.

YOUR VERBAL AGREEMENT

Individuals Involved in Your Care or Payment for Your Care: With your verbal agreement, we may disclose health information about you to a family member or friend who is involved in your medical care. In addition, we may disclose health information about you to an entity assisting in disaster relief efforts (such as the Red Cross) so that your family can be notified about your condition, status and location.

SITUATIONS REQUIRING YOUR WRITTEN AUTHORIZATION

If there are reasons we need to use your information that have not been described in the sections above, we will obtain your written permission. This permission is described as written "authorization." If you authorize us to use or disclose health information about you, you may revoke that authorization in writing at any time. If you revoke your authorization we will no longer use or disclose health information about you for the reasons stated in your written authorization. Please understand that we are unable to take back any disclosures we have already made with your permission and we are required to retain our records of the care we provide you.

YOUR RIGHTS REGARDING HEALTH INFORMATION ABOUT YOU

You have the following rights regarding health information we maintain about you. You may contact our health information representative, (reception) to obtain additional information and instructions for exercising the following rights:

You have the right to:

1. Obtain a copy of the Pro Health Group, Inc. Notice of Privacy Practices.
2. Request a restriction on certain uses and disclosures of your information. This request must be in writing. If we agree to your request, we will comply with your request unless the information is needed to provide you with emergency treatment. However if our system capabilities will not allow us to comply with your request, then we are not required to do so. We can only address requests for the practice of Pro Health Group, Inc. Your request will not extend to other external organizations that work with our practice.

3. Inspect and request a copy of your health record. This request for inspection or copies must be in writing and directed to the reception of Pro Health Group, Inc. A reasonable fee for copies will be charged. We may deny your request under limited circumstances.
4. Request an amendment to your health record if you feel the information is incorrect or incomplete. Your request must be made in writing and it must include a reason that supports the request. We may deny your request if the information was not created by our health care team, if it is not part of the information kept by our entity, if it is not part of the information which you are permitted to inspect and copy, or if the information is accurate and complete as stated.
5. Obtain an accounting of disclosures to others of your health information. The accounting will provide information about disclosures made for purposes other than treatment, payment, health care operations, disclosures excluded by law or those you have authorized.
6. Request confidential communications. You have the right to request that we communicate with you about health issues in a certain way or at a certain location. For example, you may ask that we only contact you at work or by mail. We will accommodate all requests that are reasonable based on our system capabilities. Your request must be in writing and specify the exact changes you are requesting.
7. Revoke your authorization. You have the right to revoke your authorization for the use or disclosure of your health information except to the extent has already been taken.
8. Complain about any aspect of our health information practices to us or to the United States department of Health and Human Services. Complaints about his notice or how Pro Health Group, Inc. handles your health information should be directed in writing to:

PRO HEALTH GROUP, INC.
ATTN: DR. ERICA LEHMAN
9001 WILSHIRE BLVD
SUITE 308
BEVERLY HILLS, CA 90211

You may also submit a formal complaint in writing to the Secretary of the United States Department of Health and Human Services.