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What is nutritional counseling and who can benefit?

The nutritional counseling program at Creedmoor Centre Endocrinology provides the guidance of a registered dietician (RD) to help you meet a variety of nutritional needs. A dietician provides one-on-one instruction and counseling about lifestyle changes associated with food. Nutritional education is available to any age group and sessions can be individualized to address diabetes, kidney disease, weight management or other chronic conditions.

How does the program work?

During a wellness visit, a registered dietician will discuss food and nutrition, exercise, disease prevention, and management, eating concerns and other wellness-related topics. Counseling sessions are designed to help individuals put knowledge into action and to encourage excitement and optimism about adopting new lifestyles.

The nutritional counseling program at Creedmoor Centre Endocrinology is a program that will bill your insurance plan, but many plans do not pay for this service. If the service is denied, patients are required to pay for the session(s). If the service is covered by your insurance plan, there will be restrictions, to the number of sessions you can attend, based upon individual policies.

What is the price?

Each patient is required to complete an initial visit with the RD and then he or she can participate in follow-up visits.

Self Pay Rates:

- Initial session (60 minutes) \$100
- Follow-up session (30 minutes) \$50

How do I schedule an appointment?

Appointments are available Monday through Thursday, based upon a patient's need.

To schedule call (919) 845-3332 Option 1

| Other | imp | ortai | nt r | otes |
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We ask for a 24-hour cancellation/rescheduling notice. This is out of respect for our staff and other patients. Cancellations within less than 24 hours can be difficult to fill or providing no notice at all can prevent someone else from being able to schedule during your time slot. Please call (919) 845-3332 to cancel or reschedule your appointment.

Payment Agreement – Nutritional Counseling

This Agreement is intended to provide patients/legal guardians with an understanding of the financial aspect of Nutritional Counseling Service provided. Patients/Legal guardians should read this agreement carefully before making a decision to proceed with care.

My signature below acknowledges receipt of the Nutritional Counseling Services Agreement. Further, I understand that I, as the patient or legal guardian, will be responsible for payment should the insurance company deny this service.

| Parent/Legal Guardian Signature | Date | |
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| Print Patient Name | | |