

# MY INTAKE APPOINTMENT CHECKLIST

<input type="checkbox"/>	Driver's License or other government issued ID
<input type="checkbox"/>	Insurance Card(s)
<input type="checkbox"/>	List of prescribed medications (if any)
<input type="checkbox"/>	Copy of most recent physical (if you don't have one, we will do one for you)

My intake appointment date is: \_\_\_\_\_

Carnegie Hill Institute  
116 East 92<sup>nd</sup> Street  
New York NY, 10128

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