Parents/ Guardians: Please call and verify that the location of your preference accepts your insurance prior to scheduling an appointment. If none of the suggested resources meet your needs, you can also contact your insurance company or search <a href="www.zocdoc.com">www.zocdoc.com</a> for more recommendations. After you have made your selection, please call our office at 770-957-8626 to let us know which location you choose so that we may send your referral <a href="prior">prior</a> to your appointment. Please allow our office <a href="prior">5 business days</a> to complete referrals.

## Ear, Nose & Throat

770-474-7416

•	1101 Hospital Drive #100A Stockbridge, GA 30281	//0-4/4-/416
•	Ear, Nose, Throat Institute 1365 Rock Quarry Road #300 Stockbridge, GA 30281	678-206-2424
•	Pediatric Ear, Nose and Throat of Atlanta 5461 Meridian Mark Road NE #130 Atlanta, GA 30342	404-255-2033
•	Ear, Nose, and Throat Specialists  o 1370 Wellbrook Circle Conyers, GA 30012	770-922-5458
	<ul> <li>4181 Hospital Drive #102</li> <li>Covington, GA 30014</li> </ul>	770-385-0321
•	CHOA ENT 1494 Hudson Bridge Road Stockbridge, GA 30281	404-785-5437
•	ENT of Georgia – South {No Caresource} 830 Eagles Landing Parkway Stockbridge, GA 30281	770-991-2800

Southern Crescent ENT

## **REFERRAL PROCEDURES & RULES:**

<sup>\*</sup> All Referrals MUST be from a McDonough Pediatrics physician. \* Our office needs to be notified 5 business days in advance and include: DATE, TIME and NAME OF SPECIALIST. Failure to provide all necessary information may result in delay of processing the request. \*Each specialist office has their own rules/guidelines, it is your responsibility to be aware of these policies and to follow them accordingly. \* Cancellations and/or rescheduling of appointments is your responsibility. Our office works very closely with these specialists and their offices, to ensure that we get appointments for our patients on an ASAP or first available / work-in basis. We do not want to jeopardize this relationship by referring those patients who do not follow their policies. \* In the event that your referral expires prior to your scheduled appointment date, please notify our office immediately so we can update the referral as needed.

<sup>\*\*</sup>On URGENT / SAME DAY/ NEXT DAY appointments, please notify our office ASAP so they can be processed immediately. \*\*