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Hearing & Balance Disorders Facial Nerve Disorders Skull Base Surgery Allergy

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Dear Allergy Patient,

To order serum, please fill in the bottom portion of this form completely and mail, email or fax it back to our office.
Please allow 3 weeks for serum processing. There is a \$10 fee for shipping and handling should you chose to have
your serum mailed to you. (Please note that we will not mail serum during periods of extreme heat). If you need
syringes (\$10 is not covered by insurance), they also can be mailed to you.

Please notify us of any changes to your insurance coverage. While we will gladly file the charges for your serum with
your insurance company, you are responsible for any unpaid balance. We will not send out your serum until unpaid
balances are paid.

To all Medicare Patients: We will file the charges for serum with Medicare and bill you the remaining 20%. Medicare
no longer pays for syringes or mailing fees. When ordering serum, please include payment for syringes and/or shipping
and handling with your order form.

Reminder: Injections given at home must be administered every three (3) to seven (7) days. Do not go beyond fourteen
(14) days between injections. Please refrigerate the vials upon receipt. Each vial should last approximately 3-4 months.
We suggest you order your serum when you have approximately 1/4" left in one or both vials.

Thank you,
Owens Ear Center Allergy Department

Please check the expiration date on your epinephrine. Keep it current!

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Serum Order Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ - _____

Medicare Patient? Yes ___ No ___
Any changes in insurance since your last order? Yes ___ No ___
(If yes, please include a copy of new insurance)
Do you need syringes? Yes ___ No ___
Would you like to pick up your serum?

Yes, in Dallas ___ Yes, in Ft. Worth ___ Yes, in Plano ___

No, please mail ___ (Please note that we will not mail during periods of extreme heat.)

Amount enclosed \$ _____ Date Ordered _____