



## Welcome and we thank you for choosing eRiver Neurology of New York LLC

*“eRiver Neurology of New York LLC does not discriminate against any person on the basis of race, color, national origin, disability or age in the provision of services and/or procedures.”*

Samuel Koszer, MD  
Board Certified,  
Neurology and Clinical  
Neurophysiology

Glenn Castaneda, MD  
Board Certified, Pediatric  
Neurology

Alexandr Safarov, MD  
Board Certified, Neurology

Gregory Taylor, MD, PhD  
Board Certified,  
Neurology and  
Clinical Neurophysiology

Suzanne Brown, DO  
Board Certified, Neurology

Donna Flynn, DO  
Board Certified,  
Neurology and  
Electrodiagnostic  
Medicine

E. Taylor Abel, MD  
Physical Medicine and  
Rehabilitation

Oscar Purugganan, MD, MPH  
Board Certified, Developmental  
& Behavioral Pediatrics and  
Neurodevelopmental  
Disabilities

Tami L. Bergman, NP-C  
Adult Neurology

Rita A. Giordano, APRN  
Pediatric Neurology

Kathleen Rendich, FNP-C  
Adult Neurology

### Offices Located At:

21 Fox Street  
Suite 102  
Poughkeepsie, NY  
12601

200 Westage  
Business Center  
Suite 320  
Fishkill, NY  
12524

67 Prospect Avenue  
Suite 160  
Hudson, NY  
12534

670 Stoneleigh Avenue  
BLDG 665, Suite 202  
Carmel, New York 10512

Telephone Number:  
845-452-9750

FAX Number:  
845-452-9751

Web Site:  
[www.eRiverNeurology.com](http://www.eRiverNeurology.com)

eRiver Neurology of NY LLC participates with The Federal Red Flag Anti Identity Theft Program. We are required to confirm your identity at every office visit by valid photo ID, address, and Insurance card. Failure to have the above will result in you having to reschedule your appointment.

### OFFICE POLICIES

- A. **EMERGENCIES:** IF YOU HAVE AN EMERGENCY PLEASE CALL 911 NOT OUR OFFICE.
- B. **OFFICE HOURS:** Our office hours are from 9:00 AM to 4:00 PM Monday through Friday, with the telephone turned off between 12:00 and 1:00 PM. Our office is closed on major holidays. Please call during our office hours.
- C. **APPOINTMENTS ARE SUBJECT TO CHANGE DUE TO HOSPITAL EMERGENCIES AND CHANGES IN THE DOCTOR'S SCHEDULE.**
- D. **PRESCRIPTIONS:**
  1. Please check prescriptions weekly and call at least **72 Hours** prior to running out of medications and at least **1 week** for controlled medicines.
  2. After calling our office for a refill, please allow **48 Hours** for the prescription to be called to the pharmacy.
  3. If you have not been seen by your Provider within six (6) months, **one (1) month** refill will be given and you **MUST** make a follow-up appointment in order to get any more refills. **Our Providers need to evaluate patients on a regular basis to make sure that medications continue to be effective for your care.**
  4. **PRESCRIPTIONS WILL NOT BE FILLED ON WEEKENDS.**
- E. **APPOINTMENTS:**
  1. **IMPORTANT NOTE:** If you can not keep a scheduled appointment, need to cancel or re-schedule your appointment you need to contact our office at least **24 hours** prior to your scheduled appointment or you may be charged \$ 50.00 if you do not show for your scheduled appointment.
  2. Please make sure to bring your photo ID and Insurance Card and any needed referrals to each appointment. If you do not have these you will be required to pay for the visit or reschedule.
  3. Please bring all test results from other physicians to your appointment, including Lab results, MRI's, Cat Scans etc. This can aid our Providers with your evaluation and treatment and may reduce having tests repeated.
  4. Patients may be scheduled with a Nurse Practitioner for follow-up appointments. Our Nurse Practitioners consult with our Physicians on all patients.
- F. When calling and requesting a call back from a Provider, **PLEASE ALLOW 48 HOURS** for the call back unless it is an Emergency.
- G. **TEST RESULTS:** Please do not call for test results, all results will be discussed at your next appointment. **Your Provider will contact you concerning any abnormal results.**
- H. When requesting paperwork to be completed such as Disability Forms, Employer Forms, etc please allow a minimum of **10 Business Days** for these to be completed and mailed.

**Thank you and if you have any questions please feel  
free to contact our office during Business hours.**