



Cancellations and No-Show Policy

When we make your appointment, we are reserving a room for your health needs. If you must change and/or cancel your appointment, please give us 24-hours' notice. Your courtesy will make it possible to give your reserved spot to another patient who needs to be seen.

All no shows and cancellations cancelled with less than 24-hours' notice will be subjected to a \$50.00 fee for Routine Office Visits and \$75.00 for New Patients Visits, Physical Exams and Procedures.

Repeated cancellations or missed appointments will result in the loss of future appointment privileges. The fees are the sole responsibility of the patient and must be paid in full before the patient's next appointment.

Please sign your name with today's date acknowledging the terms of this policy:

Patients Signature X _____

Today's Date X _____