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## Cancellation, Rescheduling and No-Show Policy

To ensure that each patient is given the proper amount of time allotted for their visit and to provide the highest quality care, it is very important for each scheduled patient to attend their visit on time. If it is necessary for you to reschedule your appointment, please call at least 24 hours in advance to avoid a \$30.00 rescheduling fee.

If you are unable to keep your scheduled appointment, please cancel at least 24 hours prior to your scheduled appointment if possible to avoid a \$30.00 cancellation fee. If the clinic is closed, please leave a voicemail for the receptionist.

If you arrive later than 15 minutes after your scheduled appointment, you may be asked to reschedule your appointment, in order to accommodate patients that have arrived on time.

A no-show fee of \$30.00 is charged when you miss your scheduled appointment.

Established patients of our office who do not show up for three appointments without previous notice will be terminated from the practice.

Signature of Patient/Responsible Party Date

Printed Name of Patient/Responsible Party

Witness (Office Staff) Signature Date