

APPOINTMENT CANCELLATION POLICY

We strive to render excellent dental care to you and the rest of our patients. In an attempt to be consistent with this and run on time, we have an **Appointment Cancellation Policy** that allows us to schedule appointments for all patients and know you will arrive. When an appointment is scheduled, that time has been set aside for you and when it is missed, that time cannot be used to treat another patient.

Our policy is as follows:

We require that you give our office **48 hours'** notice in the event that you need to reschedule your appointment. If you are unable to keep your appointment, you must call **within our telephone hours 48 hours in advance**. This allows for other patients to be scheduled into that appointment time. Monday appointments must be cancelled by the prior Friday by 12:00 noon. Messages left to cancel for the next business day on our answering service after our closing are considered to be less than 48 hours' notice. If you miss an appointment without contacting our office within the required time, this is considered a missed appointment. **A fee of \$35.00** will be charged to you for each missed appointment; this fee cannot be billed to your insurance company and will be your direct responsibility. No future appointments can be scheduled nor can record be transferred without the payment of this fee. As a courtesy to you, we will make every effort to confirm your appointment, but please do not consider it our responsibility to do so. If our attempts are unsuccessful, it is still your responsibility to keep your appointment or contact us 48 hours in advance to change or cancel the reserved time.

As always, we will make every effort to accommodate your scheduling needs and keep our schedule "on time." In return, we ask that you help us by keeping your scheduled appointments and by notifying us 48 hours in advance if you are unable to do so.

If you have any questions regarding this policy, please let our staff know and we will be glad to clarify any questions you have.

Thank you for your patronage.

Signature: _____ Date: _____