



PATIENT MISSED APPOINTMENT POLICY

We strive to provide our patients with the utmost professionalism and excellence of service. Our commitment to your well-being and gain of your physical abilities is something everyone in our clinic takes seriously.

Because we care so much about you, we realize it would be a disservice to you if we did not emphasize the importance of your commitment to the care you need to receive.

Your adherence to the recommended number of treatments is a vital component of your progress with our services; therefore, we have certain rules that need to be followed in order to ensure the most optimum results.

We expect that you keep all your appointments.
We will give you a printed copy of your visits so that you **do not forget**.

With the exception of serious emergencies, it is expected that you attend. **If you need to re-schedule, we require 24 hours notice.**

All missed or cancelled appointments MUST be made up the same week in order to comply with your physician's orders.

In the instance of non-sufficient notice of a cancellation or a no-show to a scheduled appointment, **we reserve the right to charge you a \$50 missed appointment fee.**

We also reserve the right to discontinue care and will inform your physician of the fact that your service has been discontinued due to non-compliance with the physical therapy order.

Please be advised that cancelling more than 3 visits may also result in a compliance report being sent to your physician.

We appreciate you greatly as our patient and strive to accomplish wonderful results and success for you. The only way for us to accomplish these results is to ensure that you are here for all recommended visits.

I have read this policy and understand that I will be charged a \$50 fee if I do not give proper notice in case I miss a scheduled appointment.

Signature _____ Date _____