

PEDIATRIC HEALTHCARE CANCELLATION POLICY

We understand that situations arise in which you must cancel your appointment. If that happens, we respectfully ask that any scheduled appointment be cancelled at least 48 hours prior to the appointment time. This will enable another patient who is waiting for an appointment to be scheduled in that slot.

Patients that miss their appointment are considered a “No Show” and will be subject to a \$35.00 administrative fee. This is a minimum amount that you will be billed. If your appointment is a consult (i.e., anxiety, ADD recheck and etc.), the charge will be more. The No Show administrative fee is the responsibility of the patient and must be paid in full to reschedule an appointment.

We understand that a healthy physician-patient relationship requires good communication and understanding. Thank you for being a valued patient.

(PATIENT NAME)

(DOB)

(PARENT / GUARDIAN SIGNATURE)

(DATE)

TEXT MESSAGE REMINDERS

To assist you in keeping your scheduled appointments, we have the ability to send text message reminders. Once enrolled, you will receive a text message almost immediately after scheduling an appointment and another text message reminder 48 hours prior to the appointment time. It is your responsibility to update our office of any changes to your family’s address or phone numbers. Only one cell phone number can be designated to receive these reminders. If you wish to use this service, please complete the section below. If you choose to discontinue the text messages, simply give our office a 30-day notice. To enroll, please provide the following information.

(CELL PHONE NUMBER)

(CELL PHONE CARRIER)

(EMAIL ADDRESS)