Ph: 615-320-3999 Fax: 615-320-8877

CANCELLATION AND NO-SHOW POLICY

We are truly thankful for each and every one of our patients. The staff and I want to take care of you in the best and most efficient way that we can. We take pride in being much better than other practices at getting you in and out of the office in a reasonable amount of time. Many of you have sung praises to us for this. We know your time is valuable. We still are able to do this because OUR OFFICE DOES NOT DOUBLE-BOOK. We enjoy being a part of your life and want you to have the healthiest life possible. We look forward to seeing you FOR LIFE.

- IF YOU MUST CANCEL OR RESCHEDULE YOUR APPOINTMENT, PLEASE GIVE US AT LEAST 2 BUSINESS DAYS NOTICE.
- If you do not give a 2-business day notice, there will be a \$50 charge.
- After two charges, the fee will increase to \$100 per occurrence.
- If you are 15 minutes late for your appointment, we will not be able to see you and your appointment will have to be rescheduled for another day.

PRESCRIPTION REFILL POLICY

- AS OF 3/15/2017, WE WILL NO LONGER TAKE REFILL REQUESTS OVER THE PHONE.
- PLEASE CALL YOUR PHARMACY AND HAVE THEM FAX A REQUEST FOR REFILLS OR YOU MAY SEND YOUR REFILLL REQUESTS ON YOUR PATIENT PORTAL.
- ALLOW UP TO TWO (2) BUSINESS DAYS FOR REFILLS TO BE SENT.

Signature	/	