

CANCELLATION POLICY

We regret the need to implement the policy below, but we have had an increasing number of patients who fail to keep their scheduled appointments. As a courtesy, we agree to confirm your appointment by a reminder call to your primary phone number two days before your scheduled appointment. You will at that time have the opportunity to cancel, confirm, or submit a request to have someone from the office contact you to reschedule. If you have scheduled your appointment within 24 hours, you will not receive a confirmation call. The result of patients not canceling their scheduled appointments is that the physician is then unable to accommodate those patients with sudden medical problems that require medical intervention.

I hereby acknowledge that I am aware and accept the financial responsibility for fees assessed to my account for failing to provide a 24 hour cancellation notice of any scheduled appointment at NOVA Physician Wellness Center.

The fee will be **\$25.00** for an office visit payable by statement or at my next scheduled visit. I understand that this fee is **not** reimbursable by my insurance carrier.

Patient Name

Patient Signature

Date