



COPAY POLICY:

COPAYS AND OUTSTANDING BALANCES ARE DUE AND TO BE PAID IN FULL AT THE TIME OF CHECK-IN. IT IS PATIENT'S RESPONSIBILITY TO BE AWARE AND PREPARED TO PAY THE AMOUNT THAT IS REQUIRED BY YOUR INSURANCE POLICY.

MISSED VISIT POLICY:

PLEASE BE ADVISED THAT STARTING 08/01/2018 THERE IS A \$25 NO-SHOW CHARGE FOR ANY MISSED VISITS OR LAST-MINUTE CANCELLATIONS.

THE NO-SHOW FEE IS DUE TO BE PAID ON OR BEFORE YOUR NEXT APPOINTMENT AT SYOSSET ENDOCRINOLOGY.

3 CONSECUTIVE NO-SHOWS OR CANCELLATIONS MAY RESULT IN ADDITIONAL ACTIONS, SUCH AS A HIGHER PENALTY OR DISCHARGE FROM THE PRACTICE.

THANK YOU!

SYOSSET ENDOCRINOLOGY MANAGEMENT

PATIENT NAME (PRINT): _____

PATIENT SIGNATURE: _____ **DATE:** _____