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## ***No Show/Late Cancellation Policy***

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This policy has been established in order to provide the highest level of physical therapy service to all of our patients. By providing us advance notice of a cancellation, we may be able to accommodate other patients with your appointment slot.

- We request that patients call at least 24 hours prior to their scheduled appointment time, when they are knowingly unable to make their appointment. Cancellations made within 24 hours of the appointment will be considered a late cancellation and will be subject to a \$75.00 late cancel fee.
- A \$75.00 fee will also apply to no call/no show patient appointments.
- After two (2) or more no shows/late cancellations, the clinic may discharge a patient from treatment. A note will be sent to your referring physician and all future appointments will be removed from the schedule.
- We do understand that emergencies arise and it may not be possible to give such notice. Exceptions to the No-Show/Late Cancellation Policy will be determined by the Physical Therapy Director based on the specific situation.

We appreciate your understanding and cooperation in helping us provide quality care to all our patients.

- Please check and sign below, acknowledging that you have read and agree to the conditions outlined above

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Signature of patient/responsible party

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Date