

## **NOTICE OF APPOINTMENT POLICY**

### **APPOINTMENTS**

#### **Missed Appointments/Broken Appointments/ "No-Shows"**

We understand that sometimes emergency situations come up and we will handle each circumstance on an individual basis. We would like our patients to understand that missed or broken appointments are hurtful in many ways. First, they delay your treatment and our ability to keep your oral health at optimum levels. Second, they may prevent another patient, who needs treatment, from getting the necessary care in a timely manner. Lastly, missed appointments increase our business expenses which ultimately results in fee increases. With this in mind we want you to be informed of our appointment policy so there are no misunderstandings in the future.

#### **Prior Notice to Change or Cancel any Future Appointments**

Each patient may miss or cancel one (1) appointment due to an emergency without a 48-hour notice in a 12-month period. After this broken appointment/ no show/ late cancellation, we will not re-appoint the patient without a \$150 appointment reservation deposit which must be collected prior to the re-appointment time. This deposit will be credited toward any outstanding balance on the patient's account, or it will be kept by IES as Patient Payment for Broken Appointment in case of a patient's late-notice of change, broken appointment, missed appointment, late-to-appointment (tardy), or no-show . After this second broken appointment, your name will be placed on a short call list, and we will call you on days when there are openings in our schedule. A third missed appointment without the required 48-hour prior notice in a 12-month period will result in your dismissal from our practice.

#### **Late/Tardy to Appointment**

Depending on the nature or scheduled treatment, we may choose to reschedule a patient's appointment if the patient is more than 15 minutes (or equivalent of your appointment time for shorter than half-hour appointments) late to the scheduled time. We reserve the duration of the appointment time to correspond to the time our clinicians would need to comfortably accomplish their treatment goals. Depending on the type and the complexity of the planned treatment, imposed shortening of the appointment duration may compromise our treatment efforts. In such cases, we may triage the urgency of treatment, and based on our assessment, we may choose to render urgent care during the reduced period (if assessed to be necessary), and complete the patient's treatment- which may had been completed in one visit- over two or more visitations. Extension of your appointment to accommodate your tardiness would not be a fair option to the following patients as it would reduce their allotted treatment time, or force them to wait longer to be seen, despite their timely arrival. We ask you to assess your schedule and travel time conditions so you would be able to arrive on time for your scheduled appointment. Please call and let us know if you would be less than 15 minutes late. Should your late arrival shorten your appointment by more than of its allotted time and force us to re-schedule your appointment to a later day or time, the above policies regarding "broken appointments" may apply.

**Emergency Appointment/ Walk-in Appointment**

We will accommodate you in a timely manner within the same day as your call (24-hour cycle) to assess and provide immediate urgent care- whenever assessed to be necessary. Regular fees during our usual practice hours will apply. Additional after-hours fees may apply for the cost of "Extension of Practice Business Hours"

We reserve the right to refuse treatment to patients with uncollected balances due over sixty (60) days, or to those patients who are in a collections process.

It is our philosophy to continue to put our patients first and to make your experience a positive one. Thank-you for allowing us to share our appointment policy with you. Please let us know if you have any questions.

**Acknowledgement of Receipt of Notice of Appointment Policy:**

I have read, understand, and agree to respect the terms of this Appointment Policy. I have been given the opportunity to receive a copy of this document. My questions have been answered in full and to my satisfaction.