



2200 N. 3<sup>rd</sup> Street  
Phoenix, AZ 85004  
Phone: 602-258-9955 Fax: 602-258-9933

## **NO SHOW / LATE ARRIVAL POLICY AND AGREEMENT**

### **No Show Policy:**

Midtown Endocrine Associates is committed to providing exceptional care. Unfortunately, when a patient cancels without giving enough notice, they prevent another patient from being seen.

A "No Show" is a patient who fails to appear for a scheduled appointment without providing a 48 hour cancellation notice. Further, a rescheduled appointment that is less than the 48 hour cancellation notice is still considered a cancellation and is treated as such. There is a \$100.00 charge for new patient and \$50.00 charge for an established patient No Show or Late Cancellation.

### **Late Arrival Policy:**

Our providers, medical assistants and staff aim to make your visit a pleasurable one. In our efforts to make your visit more comfortable and to minimize your wait time, our office has implemented a late arrival policy.

Patients are asked to arrive to their appointments before their scheduled appointment time. New patients are to arrive and check-in 20minutes before their scheduled appointment time. Established patients are to arrive and check-in 10 minutes before their scheduled appointment time. This allows enough time for the registration and check-in process to be completed before the actual appointment time.

If a patient arrives more than 5 minutes later than their scheduled appointment time, the appointment may need to be rescheduled. This is to ensure that the patients who arrive on time do not wait longer than necessary to see the provider. You may be given the option to wait for another appointment time on the same day if one is available. This process will ensure patients that do arrive on time are seen in a timely manner.

The providers and staff appreciate your compliance and understanding with these policies so that we can continue to provide excellent medical care as well as excellent customer service.

### **MIDTOWN ENDOCRINE ASSOCIATES**

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## NO SHOW / LATE ARRIVAL POLICY AND AGREEMENT

As a patient or guardian for a patient receiving services from Midtown Endocrine Associates, I understand that I am responsible to cancel or reschedule appointments and arrive for scheduled appointments within appropriate timeframes. I do hereby agree to the following:

1. I will cancel a scheduled appointment at least 48 hours before the appointment.
2. I agree to pay a \$100.00 for new patient and \$50.00 established patient appointment fee when I fail to cancel my appointment without 48 hour notice before the appointment.
3. Allowances will be made for failing to keep my appointment due to unavoidable or reasonably unforeseen circumstances.
4. The medical professionals at Midtown Endocrine Associates may terminate my services if I do not cancel or fail to attend two scheduled appointments in a year.
5. Should Midtown Endocrine Associates terminate my services, they will send me a "termination of services letter. This letter will explain that a 30-day grace period will be given to enable me to secure alternative services, and will also allow prescription refills when medically appropriate for 30 days from the date of the "termination of services" letter.

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Patient / Guardian Signature

Date