

Office Scheduling Guidelines



In an effort to reduce the number of sudden, unforeseen changes in our schedule, we are now implement scheduling guidelines. We are requiring a minimum of three business days' notice for any scheduling changes. If more than one scheduling change is made without proper notification, a rescheduling fee of \$50 - \$150 will be required to schedule future appointments with our office.

We realize that, on occasion, emergencies arise making it difficult to give proper notification. Your effort to inform us as soon as possible will be greatly appreciated, as we have patients in need that could use the reserved time if given enough notification.

We thank you in advance for your cooperation, it is much appreciated

Patient's Signature: _____ Date: _____