

To Our Patients Regarding Cancellations and No-Shows

The following are our policies regarding cancellations and no-shows. We take this subject seriously at the clinic because it can make a difference between whether you succeed in your treatment or not. Usually your referring doctor and/or your therapist have prescribed a set frequency of treatment. Showing up as scheduled for these visits is your most important job. Other than that, all you need to do is follow your therapist's instructions and we will be able to help you achieve your goals in treatment.

1. Please understand that your pain will probably increase and decrease as your course of treatment progresses and before it is finally erased. Either condition can seem to be a reason not to come in: a) you're feeling worse and think the treatment is not working or, b) you're feeling better and it's a great day for golf. Neither of these conditions is legitimate as a reason not to come in: a) if you're in pain, come in and get fixed, b) if you're out of pain, now is the time that we can begin doing some real correction of the underlying causes of your problem, educate you so you won't re-injure yourself, etc.
2. There is a **\$50** charge for a cancellation or missed appointments without prior notice. **This charge will not be covered by insurance, but will have to be paid by you personally.**
3. We require 24 hour notice in the event of a cancellation. It is your responsibility, when you call in, to have an alternate time in mind that will ensure you get in the full prescribed number of treatments that week whenever possible.
4. For Worker's Compensation and Personal Injury patients documentation of any missed appointments is forwarded to your Case Manager and Primary Physician and this can jeopardize your claim.
5. You may need to see a therapist other than one who normally treats you if you do re-arrange your appointment. All of our therapists are experienced professionals, and they will study your patient chart, so you will be in good hands.

When you don't show as scheduled, three people are hurt: **You** because you aren't getting the treatment you need prescribed by your doctor and /or PT; **the therapist** who now has a space in their schedule since the time was reserved for you personally; and **another patient** who could have been scheduled for treatment if you had given proper notice.

Please co-operate with us in this regard. We're looking forward to working with you.

Patient Signature

Date