



## **Cancellation and No-Show Policy**

***The subject of cancellations and no-shows is a serious matter because it affects the success of your treatment.***

It is expected that you follow the frequency and duration of treatment prescribed by your referring physician and physical therapist to achieve the greatest improvement for your condition.

**24-Hour** notice is required in the event you must cancel an appointment. It is your responsibility to reschedule to follow the prescribed physical therapy program.

***A \$25.00 fee may be imposed in the event of a cancellation without proper notice, or if you do not show up for a scheduled appointment.***

We request that you schedule all your appointments with your primary physical therapist. Make-up appointments may be made with another therapist when necessary. Scheduling in advance allows your choice of days/times and therapists, as dates fill quickly, and you cannot be guaranteed your first choice.

It is important that you keep all your appointments, even if you are feeling pain in order to gain relief and to make your physical therapist aware of any discomfort you are experiencing.

When a patient does not arrive as scheduled, *three* people are affected: You as the *patient* who is not receiving prescribed treatment, the *physical therapist* who had their time reserved to provide you with ample time for your treatment, and *another patient* who could have been scheduled for treatment in your place had proper notice been given.

Thank you for your cooperation and understanding.

Patient Signature: Click or tap here to enter text.

Date: Click or tap to enter a date.