# Dr. Mickey & Associates Updated Cancellation, Late and No Show Policy

### To Our Valued Patients:

We strive to provide excellent dental care to our patients. In order to do so, we have updated our Cancellation, No Show and Late Appointment Policy. This updated policy enables us to better utilize available appointments for our patients, while being fair to both our patients' and our valuable time.

You must provide at least 24 hour notice if you are unable to keep your reserved appointment. Patients who cancel their appointments less than 24 hours in advance or do not show up for their reserved appointment times are considered a "No-Show."

# **First No-Show**

If you No-Show for a reserved appointment, you will receive a telephone call from us informing you that you have missed a scheduled appointment and we will reschedule the missed appointment for a time convenient for you. At this time, we will remind you that a second No-Show appointment will limit your ability to make future appointments. If you No-Show for a second time, you will be given a limited time frame in which to re-book all future appointments.

# **Second No-Show**

If you No-Show for a scheduled appointment for a second time, you will only be able to schedule future appointments on Mondays through Fridays between the hours of 10:00am – 12:00pm. You will not be able to schedule future appointments for early morning, after school, evening or Saturday appointments.

# **Third No-Show**

If you No-Show a third time, dismissal from the practice will be considered.

# **Late Arrivals**

Please call us if you think you will arrive late for your reserved appointment time. If possible, we will try to adjust our schedule. However, it is possible we may ask you to reschedule your visit to another day if it interferes with another patient's time.

Please sign that you have read, understand and agree to this updated policy.

| Patient(s) Names – Please list all the children in your family |      |  |
|--|------|--|
| Signature of Parent/Guardian                                   | Date |  |
| Preferred contact number and email:                            |      |  |