



SIMPSON EYE
PHYSICIANS & SURGEONS

Patient Visit No-Show and/or Late Cancellation Policy

Dear Valued Patient,

We strive to provide the best possible care to all our patients. When a patient doesn't show for their appointment or cancels at the last minute (less than 24 hours), it can affect the care of other patients. Unfortunately, we've seen an increase in these occurrences and find it necessary to implement a No-Show and/or Late Cancellation Policy. We understand that situations arise in which you must cancel or reschedule your appointment. It is therefore requested that if you must do so, you provide at least 24 hours' notice. Beginning May 1st, 2026, missed appointments or same-day cancellations will result in a \$50 fee. To cancel or reschedule, please get in touch with our office by calling us at 847-426-0227.

If you do not show up for your appointment, cancel or reschedule prior to 24 hours of your appointment time, we will consider that a no-show. No-show appointments are subject to the \$50 fee. No-show fees are the patient's sole responsibility and must be paid in full before your next appointment. If the no-show fee might prevent you from receiving necessary care, please contact us. A "No-Show" is defined as a patient who fails to attend their appointment without notifying the clinic before the appointment time. A "Late Cancellation" is defined as an appointment canceled within 24 hours of the scheduled appointment time.

We know that unexpected situations sometimes arise. In the case of emergencies or extenuating circumstances, we may waive the no-show fee. Waivers are determined on a case-by-case basis at the practice management's sole discretion.

If our office must cancel your appointment with less than 24 hours' notice, you may choose to meet with a different provider (if available) on the same day, choose to reschedule, or cancel. In these circumstances, we will not charge you a cancellation fee.

If you have questions about our cancellation policy or you're experiencing an emergency, please call us at 847-426-0227.

If you believe you received a fee in error, please contact our billing department at 847-426-0227.

Thank you for the privilege of being a partner in your healthcare!

Patient Signature:

Date: