



PINNACLE  
Family Health Care

## **APPOINTMENT COMMITMENT**

We understand that situations arise in which you must cancel your scheduled appointment. It is required that you provide at least 24 hours' notice by calling our office, if you need to cancel or reschedule your appointment. We know that unexpected emergencies may occur and make it necessary to cancel an appointment with less than 24 hours' notice. Please **call our office** immediately at (405) 857-8880 and we will do our best to accommodate your situation. Exceptions to this policy can only be determined on an individual basis, according to the circumstances.

If you arrive more than 15 minutes late to your appointment, you may be asked to reschedule. Contingent upon the schedule, we may be able to work you in later in the day. If you agree, you must wait until an appointment time is available or another patient cancels.

A \$50.00 fee will be charged to the patient's account for any appointment that is missed, cancelled or rescheduled without at least 24 hours' notice. Any fees charged, are the sole responsibility of the patient /or legal guardian of the patient and must be paid in full prior to scheduling any further appointments.

If you have reserved an appointment time for treatment with our provider, a missed appointment results in lost time which prohibits another patient from receiving the treatment they need. We make every effort to stay on schedule, so we respectfully ask patients to do the same and arrive for their appointments on time. We ensure you that in following all the above policies, it will allow us to serve you better. We thank you in advance for your understanding and cooperation.

By signing and dating below, it is agreed that you have read, fully understand and will adhere to the PINNACLE Family Health Care Appointment Commitment Policy.

\_\_\_\_\_  
Patient Name (Please Print)

\_\_\_\_\_  
Patient /or Legal Guardian Signature

\_\_\_\_\_  
Date