

West Michigan Nephrology P.L.C.

APPOINTMENT CANCELLATION / NO SHOW POLICY

We have made every effort to schedule the appropriate time for you to be evaluated and discuss your concerns regarding your health care with your physicians. Because of the specialty nature of the practice, as well as the chronic condition of most patients all available appointment times are booked well in advance. Due to the increasing number of patients that fail to show up for their scheduled appointments, we have found it necessary to implement a policy to handle this growing problem.

If you cannot keep your appointment, you should be aware that we have many seriously ill patients that could utilize your appointment time. **We require at least a 24 hour notice to cancel or change an appointment. Failure to do so will result in being charged a \$30 Late Cancellation / No Show Fee. THIS WILL NOT BE BILLED TO, OR REIMBURSED BY INSURANCE, and should be paid prior to rescheduling.**

While it is unfortunate that we must require this measure, it is our hope that it will serve the best interests of both the patients and physicians. As always, if you have any questions or concerns regarding this policy, please feel free to contact us.

RESPONSIBLE PARTY/

PATIENT SIGNATURE: _____ DATE: _____

HANDWRITTEN NAME: _____