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DALLAS OFFICE
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No-Show Policy

The Physician's Weight Control & Wellness Centers are dedicated to providing the highest quality care to our patients and we want to thank you for the privilege of being able to help you succeed in becoming a healthier you.

Recently, we have been experiencing an increased number of patients who have failed to call and cancel their appointments. In an effort to correct this problem we have found it necessary to implement a No-Show Policy for our office. We truly regret having to implement a policy such as this, but in fairness to our patients who need to make an appointment and could have been scheduled at the time of a No-Show patient, we need to take actions necessary to see that our appointments are open and available for our patients.

Effective August 1, 2009 there will be a \$25.00 charge for any patient that misses two (2) scheduled appointments per calendar year, without having given 24 hours or more advanced notice.

A No-Show is defined as failing to cancel an appointment, at least 24 hours before your appointment time, either by talking to someone on our staff or calling and leaving a clear message (first and last name, date and time of appointment) canceling your appointment. After hours cancelation messages may be left on our answering service by calling 214-827-1060 and Pressing 3. All messages are recorded and kept.

or

Showing up tardy 15 minutes or more, according to the in-office clock, is also considered a No-Show and will result in rescheduling.

Thank you for your understanding,

Physician's Weight Control and Wellness Centers, Dallas Office

I have read, understand, and agree to the No-Show Policy:

Patients Signature: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Date: \_\_\_\_\_

Patient:

Your No-Show appointments will be noted in your chart. After two (2) occurrences during the calendar year, you will receive, by mail, a copy of this signed policy with the dates of the missed appointments noted below. Receiving a copy of this signed policy in the mail will indicate that will be charged a \$25.00 No-Show fee due at the time of your next appointment.

1st No-Show: Date: \_\_\_\_\_ Appt Time: \_\_\_\_\_

2nd No-Show: Date: \_\_\_\_\_ Appt Time: \_\_\_\_\_

Notification Date: \_\_\_\_\_ Sent by: \_\_\_\_\_