

Desert Vein and Vascular Institute Cancellation Policy

Desert Vein and Vascular Institute is committed to helping you manage and maintain your healthcare needs. When you schedule an appointment with one of our physicians or technicians that time is reserved exclusively for you to discuss and review your medical concerns. We do understand that on occasion, unforeseen circumstances do arise and the need to cancel your scheduled appointment may be necessary. If you know that you will be unable to keep your appointment, we ask you to show consideration by calling our office **24 hours in advance**. Providing our office with adequate notice will allow us to offer that appointment time to another patient.

The following no-show and/or late cancellation fees will be assessed:

A **\$25** charge will be assessed for "no showing" or for failing to give 24-hour notice of the need to cancel all **routine appointments and ultrasound appointments**.

A **\$100** charge will be assessed for "no showing" or for failing to give 24-hour notice of the need to cancel all **scheduled procedures**.

Please be advised that these <u>charges are not billable to your insurance</u> and will ultimately be the responsibility of the patient. All no show charges will need to be paid before your next appointment.

Your signature below indicates that you hav	e read and agree to the above policy.
Patient Name	Date
Signature	