

## TOWER NEPHROLOGY MEDICAL GROUP

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### OFFICE CANCELLATION POLICY

We will make a courtesy confirmation call to remind you of your appointment. We consider any cancellation made 24 hours prior to your appointment a short notice cancellation. (business days for our office are Monday through Friday.)

#### **YOU MAY LEAVE A MESSAGE ON OUR 24 HOUR VOICEMAIL.**

We understand that there will be circumstances that may require you to cancel your appointment. Our office is staffed to provide you with your scheduled treatment. When you cancel on short notice or miss your appointment, we are left with an open appointment that someone else could have used. We reserve the option of charging a fee of **\$50.00** to your account for any short notice cancellation.

#### **THANK YOU FOR YOUR UNDERSTANDING.**

Your signature below indicated that you have read and understood our cancellation policy.

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

Signature: \_\_\_\_\_

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