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## MISSED APPOINTMENT POLICY

We respect the importance of your time and work very hard to schedule appointments which accommodate the busy scheduling needs of all of our patients. In return, we ask that patients make every effort not to change reserved dental appointments. Broken and missed appointments create scheduling problems for other patients as well as the practice.

If emergency circumstances prevent you from keeping an appointment we certainly understand, all we ask is that you call us immediately so we can try to accommodate another patient.

Ultimately as with any appointment, it is your responsibility to keep track of your appointments. We ask you to provide us with a minimum of twenty-four business hours notice. Failure to do so may result in a cancellation/missed appointment fee of \$50 per hour of appointment time reserved for you.

We provide as a courtesy, two weeks prior, a reminder call to all dental hygiene appointments. We also make reminder calls to our patients prior to all appointments. This effort shows our commitment to all of our patients and the importance of their health.

If you have any questions, please do not hesitate to contact us. We sincerely appreciate your understanding and cooperation in this manner.

I confirm that I have read and fully understand all of the information provided.

By signing below, I acknowledge that I have read this statement and agree to the contents.

## Signature of patient, parent, or guardian (responsible party):

Patient's Name:	Date:
Patient's Signature:	Date:
Relationship to the Patient:	Date: