

Misch Implant & Aesthetic Dentistry

*Specialists in Oral & Maxillofacial Surgery,
Periodontics and Prosthodontics*

Appointment Cancellation Policy

Our goal is to provide quality dental care to all our patients in a timely manner. No-shows, late arrivals, and cancellations inconvenience not only our doctors, but our other patients as well. Please be aware of our policy regarding missed and/or cancelled appointments.

We understand that occasionally our patients may need to reschedule an appointment. A cancellation made with less than a 48 hour notice significantly limits our ability to make the appointment available for another patient in need. A missed appointment takes up more of our staff's time for rescheduling. It also is lost unproductive time for the office and requires paying our staff for time that provides no revenue. This hurts our business, wastes time and prevents us from efficiently caring for other patients.

We know your time is valuable, and ours is too. Out of courtesy to our office and our other patients, we ask that you give us adequate time if you need to cancel or reschedule. Please provide our office at least a 48-hour notice in the event that you need to reschedule your appointment. If you need to cancel or reschedule your appointment we must receive direct communication with the staff before 4 pm, two days before the appointment to avoid a fee. Leaving a message on our phone service is not adequate as our staff may not be able to listen to the message in time. This would also apply to weekend calls. If your appointment is on Monday, the cut-off time is by 10 am on Friday as we close at noon on Fridays. If you need to cancel or reschedule your appointment, please call us at 941-957-6444 between the hours of 8 am - 4 pm Monday through Thursday. On Friday our hours are 8 am - 12 pm.

A "No-Show", "No-Call" or missed appointment, without proper 48-hour notification, may be assessed a \$50 fee. For appointments scheduled for one hour, such as a surgery or prosthetic procedure, the fee would be \$200. For appointments over one hour, an additional fee of \$100/hour would be assessed. For example, if you cancelled a 3 hour appointment the total fee would be \$400. This payment would not apply to your treatment plan balance.

As a courtesy, we try to make reminder calls, for appointments, one to two days in advance. Please note, if a reminder call or message is not received, the cancellation policy remains in effect. If you have any questions regarding this office policy, please let us know and we will be glad to clarify. A copy of this policy will be provided to you.

I have read and understand the Appointment Cancellation Policy and I acknowledge its terms. I also understand and agree that such terms may be amended from time-to-time by the office.

Printed Name _____

Patient Signature _____ Date ____ / ____ / ____