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**NO SHOW POLICY**

Patient Name: \_\_\_\_\_ Date of Birth : \_\_\_\_\_

**TO ALL OF OUR PATIENTS:**

It is our goal to provide quality medical care to our patients in a timely manner. In order to effectively accomplish this, we have to adhere to an appointment schedule.

We understand that situations may arise that prevents you from coming into our office during your scheduled appointment. In accordance with Gulf Coast Dermatology policy, we request that you notify us at least 24 hours in advance to reschedule or cancel your appointment. This allows us to manage our appointments more efficiently and to serve other patients that may need to be seen.

We reserve the right to charge a nominal fee of \$25 or \$50 for cosmetic appointment, if a patient does not provide adequate notice or fails to show up for their appointment. We will make an effort to contact you to remind you of your missed appointment, to reschedule and discuss with you the "no show fee" that will be annotated on your account and payable, at your next appointment. Patients that have three or more occurrences of repeated "no show" may be dismissed from our care.

If you have any questions regarding this policy, please contact our office (850) 233-3376 or (850) 234-2597.

We kindly request you sign the acknowledgement below if you have read and understand our policy as explained in this letter and return it at your scheduled appointment.

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date