

KCOI REHABILITATION NO SHOW POLICY

The Rehabilitation Department “No Show Policy”

In order to ensure that you receive the maximum benefit from your visits in rehabilitation we will set up, in conjunction with you as prescribed by your doctor, a schedule of appointments. These times are specifically set aside for you and it is recommended that you attend every session until which time that you and your therapist determine that supervised therapy is no longer needed. As such it is requested that if, for some reason you cannot attend a scheduled appointment, you call us to cancel that time so we may have the opportunity to fill it with another patient.

If you, the patient, do not show for your scheduled treatment session (without previously calling to cancel), you will be charged \$50.00 for that missed appointment. The form of payment that we have on file will be debited for the fee, or you will be billed directly and your file will be noted as such.

Thank you for your compliance with this policy.

I HAVE READ AND UNDERSTAND THE NO SHOW POLICY

Signature: _____ Date _____

Print Name: _____

We understand that emergencies happen. However, we would appreciate a 24 hour notice when possible. Thank You. _____ (Initial)