



Attendance Contract

I understand that my attendance at my appointments is a critical part of successfully meeting my goals. The staff at Integrated Physical Therapy respects your time and we ask for the same courtesy. Missed appointments (no shows) and last minute cancellations affect our ability to provide timely attention to our patients. When a patient does not show up for their appointment, another patient loses an opportunity to be seen. I understand that if I must cancel an appointment I will give 48 hours notice. If I am unable to give 48 hours notice I will still call to cancel, however, I understand that cancelling with less than 48 hours notice will count as a no-show and a fee of \$40 will be assessed to me and is not billable to my insurance company.

Our office policy regarding missed appointments is as follows:

- If you accumulate **two** missed appointments or last-minute cancellations, you will only be allowed to schedule one visit at a time.
- If you accumulate **three** missed appointments or last-minute cancellations, you will be required to call on the day you are available and see if there is an opening in the schedule.
- If you no show for an appointment and we do not hear from you within **one** business day all future appointments will be cancelled automatically.

The satisfaction of all our patients is important to us. We thank you in advance for your cooperation with this attendance policy.

Patient Signature: _____

Date: _____