## ' Special Care For Women' Dr. Braden Richmond, MD

<u>APPOINTMENTS</u>: Office visits are by appointment only. Please arrive 15 minutes early for your appointment. Patients who are over 15 minutes late may be asked to reschedule at the physician/staff discretion. Please bring prescriptions/new medical information to each office visit.

<u>CANCELLATIONS</u>: We value ALL of our patients and strive to provide the best care possible in the most comfortable setting. PLEASE understand that when we schedule your appointment, we are reserving time for YOUR particular needs! We kindly ask that if you must change an appointment, please give us MORE THAN 1 BUSINESS DAY NOTICE. This courtesy makes it possible to give your reserved time to another patient who needs it. When your appointment is made, a room is reserved, your records prepared, and any special instruments are readied for your particular visit.

**MISSED APPOINTMENT (NO-CANCELLATION)**: We understand that occasional missed appointments can occur for a variety of reasons, but when you miss an appointment without canceling IN TIME, the time is wasted that could have been used for another patient. A "NO-SHOW/LATE is defined as missing an appointment without canceling at least 1 business day prior. For Monday appointments this would mean notifying us the previous Thursday. There will be a \$50 charge for a "no-show," and repeated "no-show" appointments may result in dismissal from the practice. This problem is disruptive to our ability to care for you, as well as other patients. Rescheduling 3 appointments in a row, or 4 times in 3-month period, shows habitual behavior/lack of consideration, and will result in "walk-in status"-you would only be seen upon arriving in the office and waiting until all scheduled patients are seen. We reserve the right to dismiss disruptive patients.

**PAYMENT/ NONCOVERED SERVICES**: Payment is due in full at the time of service. NO EXCEPTIONS. It is the patient responsibility to know what is owed for co-pays, co-insurance, deductibles, etc. It is YOUR responsibility to know what services provided may or maynot be covered under your insurance contract. While we certainly try to be aware of these policies, it is impossible to know what may not be covered. If lab tests, radiology test, services, etc., are not covered, you will be expected to pay for those, IN FULL. If you have any questions about your insurance coverage, please make us aware and we will be happy to try to help,or you may defer any possible uncovered services until you have contracted your insruane company. Any and all fees, including collection fees, related to services provided, are that strict reponsibility of the patient.

By signing below, I acknowledge that I have read this page carefully, and in full, and accept all of the above policies of Special Care for Women.

(Signature)

(Date)