## **Appointment Cancellation or Change Policy**

At Breeze Dental Care we pride ourselves on the amount of time we are able to spend with
each patient. We are able to spend the additional time with each patient due to accurate and
efficient scheduling. (Please keep in mind that emergencies do arise, and this may affect your
appointment time. We will do our best to inform you if we are running behind.) Due to this
we ask that you give at least a 48-hour notice if you do have to change an existing
appointment. Any missed or last-minute cancelled appointments will be subject to a \$50.00
missed appointment fee. This fee must be paid prior to scheduling your next appointment. In
the event you have another appointment scheduled, the fee will need to be paid 2 weeks prior
to that appointment or that appointment will not be able to be held for you.

After 3 missed or cancelled appointments, without a 48 hour notice, we will no longer be able to see you as a patient. At any given time, we may have dental emergencies that arise. Without prior notice from you we cannot accurately schedule them.

Our office has computer software that will contact you to confirm your appointment. <u>We do need to have each appointment confirmed</u>. <u>If you do not confirm though our automated system</u>, please call our office to confirm your appointment directly.

\*All Monday appointments need to be rescheduled by the Thursday prior to the appointment to avoid a missed appointment.

By signing this form you are stating that you understand and agree to the t	erms of ou	J٢
appointment cancellation policy.		

Signature of patient or guardian	Date	