No-Show and Cancellation Policy
Sarah Lazarski NP

Policy Overview

Our practice is committed to providing quality, accessible care to all our patients. To ensure efficient scheduling and availability, we have established a formal policy for missed appointments and late cancellations. This policy is designed to reduce disruptions and cover administrative expenses of no-show appointments.

. Definition of a No-Show

A “no-show” appointment is defined as:

- A failure to arrive for a scheduled appointment.
- A cancellation or rescheduling made less than 24 hours prior to the scheduled appointment time.

Patient Responsibility

Patients are expected to notify the office at least 24 hours in advance if they are unable to keep their scheduled appointment. Notifications can be made by calling our office at 224-442-1230.

No-Show Fee

A $50 fee will be charged for all missed appointments or cancellations made less than 24 hours in advance.

This fee is the patient’s responsibility and cannot be billed to insurance.

- The fee must be paid prior to scheduling any future appointments.

Exceptions

We understand that emergencies and unforeseen circumstances may occur. Exceptions to the no-show fee may be granted at the discretion of the office under the following circumstances:

- Medical emergencies.
- Severe weather conditions.
- Other situations deemed acceptable by the practice.

Repeated No-Show Appointments

Patients with repeated no-show appointments may be subject to additional actions, including but not limited to:

- Requirement of a deposit for future scheduling.
- Discharge from the practice.

Individuals with two no-shows for initial appointments will not be granted future appointments.

These actions will be communicated to the patient in writing if necessary.

Acknowledgment of Policy

By signing below, the patient acknowledges that they have read, understood, and agree to the terms outlined in this policy.

Patient Name: _____

Patient Signature:_____
Date:_____