

Quality care for our patients is our priority. No-Shows and excessive last-minute cancellations have a negative impact on the efficiency of our practice, can potentially jeopardize the health of our patients, and is a disruption to the patient flow and scheduling availability. Scheduled appointments represent an agreement between you and your physician. Patients are expected to regularly attend scheduled appointments. In order to best manage our appointment availability, Raleigh Pediatric Associates must require advance notice to cancel or reschedule an appointment.

Raleigh Pediatrics will consider appointments which meet the following definition as 'No-Shows':

- Any pre-scheduled appointment that is not cancelled with a minimum of 24 hours advanced notice.
- Any appointment that is scheduled on the same date of service that is not cancelled with a minimum of 1-hour notice.
- Any late arrival of more than 10 minutes and the patient is consequently unable to be seen.

#### **CONSEQUENCES OF NO-SHOW APPOINTMENTS:**

**No Show Fees:** A **\$25 no-show fee** may be charged to the account for **any** missed appointment type. **No-Show fees will be assessed per patient.** Double Header Appointments (multiple patients scheduled) will be subject to **multiple** no-show fees.

We understand that circumstances may sometimes prevent families from being able to extend advance notice when cancelling appointments. For this reason, Raleigh Pediatrics will extend a **one-time** No-Show fee forgiveness for the 1<sup>st</sup> missed appointment. However, the missed appointment will count towards the documented no-show history.

*Patients having Medicaid coverage may not be charged a No-Show fee. However, No-Shows will be documented and may result in dismissal from care as outlined below.*

**Dismissal / Termination of Care:** Families having 3 or more No-Shows within a 24-month period will be considered for dismissal. Patient dismissal is at the discretion of your medical provider. Once dismissed, emergency medical treatment will be offered within the first 30 days of dismissal. **Once a Physician has dismissed a family due to no-show abuse, the decision will not be reversed.**

**In addition, Families who have a no-show history consisting of 2 or more no-shows for multiple 12 month periods will be considered for dismissal.**

Families who no-show for a double header appointment (2 or more patients scheduled at the same time) may be restricted from scheduling double appointments in the future.

New patients who no-show for their initial visit will receive a letter explaining that new patients who have 2 or more no-shows for their initial visit will not be allowed to establish care. A copy of the No Show Policy will be included with the letter.

Raleigh Pediatrics will attempt to contact our patients by phone and by email two business days before your scheduled appointment. **\*\*\*Please remember that confirmation calls are a courtesy. It is the Parent/Patient's responsibility to keep up with your scheduled appointment date and time, and to notify the office in advance when there is a need to cancel or reschedule.\*\*\***



**ACKNOWLEDGEMENT OF RECEIPT**

Chart #: \_\_\_\_\_

Patient's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I have received and read a copy of Raleigh Pediatrics' No Show Policy.

\_\_\_\_\_  
Signature of Patient/Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Patient/Parent/Guardian