

Northwest Orthopaedic Surgeons, P.S. Cancellation Policy

I understand that I may be charged a fee by Northwest Orthopaedic Surgeons for missed appointments or appointments that are cancelled or rescheduled less than 24 hours before the appointment time. I understand that I am directly responsible for payment of the fee and that my insurance company will not be billed.

The fee for a missed or late cancelled/rescheduled appointment is a minimum of \$25 (\$75 for procedures).

I understand that if I am billed a cancellation fee, I will not be able to reschedule an appointment or be treated by any provider at Northwest Orthopaedic Surgeons until such fee is paid.

To prevent this charge please notify our offices at least 24 hours in advance if you are unable to keep your appointment.

By my signature below, I acknowledge that I have read and understand the cancellation policy.

Patient signature

Date

Printed Patient Name