Hands On Therapeutics



Policy Notifications

**Please read carefully and initial each policy and sign and date the bottom.**

\_\_\_\_\_\_\_\_Per our policy, there is a **$25 charge for follow up appointments and a $50 charge for new patients** that **miss** or **cancel** their appointment without a 24-hour notification. This fee will be collected at your **NEXT** scheduled appointment.

\_\_\_\_\_\_\_\_Our practice strives to run on time. If you are more than **10 minutes late** for your **scheduled appointment time** or are a new patient and your paperwork is not completed by your scheduled appointment time, you may be asked to reschedule.

\_\_\_\_\_\_\_\_Copays, Co-insurance estimates and Training payments are **due at the time of service**. If you are unable to pay you may be rescheduled to another date.

Patient Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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