



**DIGESTIVE  
DISEASE  
SPECIALISTS, INC**

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### **Procedure & Appointment Cancellation Policy**

In the event that your appointment for an office visit or procedure needs to be canceled or rescheduled, please notify your provider's office as soon as possible and no later than 48 hours prior for office/72 hours prior for procedure. This will allow us to provide timely care to other patients.

Failure to provide the provider's office with a minimum of 48 hours advanced notice of intent to cancel, reschedule or not show **for an office visit** may result in a \$50.00 surcharge to your account. Failure to provide the provider's office with a minimum of 72 hours advanced notice of intent to cancel, reschedule or not show **for a procedure** may result in a \$200.00 surcharge to your account. This charge is the responsibility of the patient and cannot be billed to your insurance company.

A patient who misses three appointments without notifying us (no call, no show), within the time frames mentioned above, may be dismissed from our practice and will need to seek medical care elsewhere.

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