

# Allergy & Asthma

DIAGNOSTIC OFFICE

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## NOTICE OF NO SHOW AND CANCELLATION POLICY

At the Allergy & Asthma Diagnostic Office, as a courtesy, we will attempt to remind you of your office appointments in advance. We understand that life is not always predictable and there are times when you must miss an appointment due to an emergency.

**We require a 24 hour notice for any cancellation.** There will be a \$150.00 “no show” fee for CONSULTATION APPOINTMENTS, \$75.00 “no show” fee for TESTING APPOINTMENTS and \$40 .00 “no show” fee for all other appointments. ***This fee must be paid prior to scheduling any non-acute office visits.*** These fees are considered Non-Covered services by all insurance carriers.

Office: 315.701.9500 Email: [patients@allergyaway.com](mailto:patients@allergyaway.com) Website: [www.allergyaway.com](http://www.allergyaway.com)

Due to a high patient demand for appointments, and limited availability, non-emergent cancellations on the same day will result in a fee. Please help us serve you better by keeping scheduled appointments. Please understand that it is your responsibility to know when your appointment is.

Multiple No-Show or canceled appointments with less than 24 hours notice, may lead to dismissal from the practice.

We thank you for your understanding.

I have read and understand the policies the Allergy & Asthma Diagnostic Office has regarding no-shows and cancellation appointments.

\_\_\_\_\_  
Patient Name

\_\_\_\_\_  
Signature of Patient/Legal Guardian

\_\_\_\_\_  
Date

REV: 8-2018