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**OFFICE POLICIES**

**Effective 07/05/2012**

* There is a **$25.00** fee for failing to show or for cancelling an appointment with less than 24 hour notice.
* There is a **$50.00** fee for failing to show or for cancelling a procedure with less than 24 hour notice.
* Your co-payment is expected at the time of service.
* There is a **$40.00** fee for all returned checks.
* Accounts will be subject to a monthly 7% compound interest fee on outstanding balances after 3 months.
* In the event of overpayment by your insurance company, any amount under $100.00 will be placed as a credit on your account, unless you otherwise request.

We appreciate the opportunity to serve you. We are committed to providing quality care and a positive experience. Your effort to keep scheduled appointments, or reschedule in a timely manner, allows us to manage the office and schedule staff to optimize your care. Please review the comprehensive listing of office policies established to enable us to best meet the needs of all of our patients