



EndoHealth.
ENRICHING CHILDREN'S LIVES

GAYATHRI DEVINENI M.D.

NO SHOW/MISSED APPOINTMENT POLICY

We, at **Endo Health Atlanta**, understand that sometimes you need to cancel or reschedule your appointment and that there are emergencies. If you are unable to keep your appointment, please call us as soon as possible (with at least a 48-hour notice). You can cancel appointments by calling the following number: **(678) 829-6030**. **This is the only guaranteed way to successfully reschedule a patient's appointment, as we now have several office locations.** If the appointment is rescheduled using any other method, we are not responsible if we are unable to facilitate that appointment.

To ensure that each patient is given the proper amount of time allotted for their visit and to provide the highest quality care, it is very important for each scheduled patient to attend their visit on time. As a courtesy, an appointment reminder call to you is made/attempted two (2) business days prior to your scheduled appointment. However, it is the responsibility of the patient to arrive for their appointment on time.

PLEASE REVIEW THE FOLLOWING POLICY:

1. Please cancel or reschedule your appointment with at least a 48 hours' notice: There is a waiting list to see the clinician at **Endo Health Atlanta** and whenever possible, we like to fill cancelled spaces to shorten the waiting period for our patients.
2. If less than a 48-hour cancellation is given this will be documented as a "No-Show" appointment.
3. If you do not present to the office for your appointment, this will be documented as a "No-Show" appointment.
4. After the first "No-Show/Missed" appointment, you will receive a phone call or letter warning that you have broken our "No-Show" policy. **Endo Health Atlanta** will assist you to reschedule this appointment if needed.
5. If you have 2 "No-Show/Missed" appointments within a one-year time period, you will receive a warning letter from our office and will be assessed a \$25.00 no show fee.
6. If you have 3 "No-Show/Missed" appointments within a one-year time, you will receive a second \$25 no show fee assessment. Dismissal from the practice will be considered.
***You will be notified by letter if the dismissal was approved.**

I have read and understand Endo Health Atlanta's No Show/Missed Appointment Policy and understand my responsibility to plan appointments accordingly and notify Endo Health Atlanta appropriately if I have difficulty keeping my scheduled appointments.

Patient Name	Date of Birth	Date
Patient Signature or Parent/Guardian if minor	Relationship to Patient	
Staff Signature	Date	