

APPOINTMENT & COMMUNICATION POLICY

To provide the best care to all our patients, we have implemented the following no-show and appointment confirmation policy:

- A No-Show Fee of \$50.00 will be charged to the patient's account for missed hygiene appointments without proper notice.
- A No-Show Fee of \$100.00 will be charged for missed doctor treatment appointments without proper notice.
- If you are more than 15 minutes late, your appointment will be considered a no-show and will need to be rescheduled. A no-show fee will apply.

Patient Initials: _____

APPOINTMENT CONFIRMATIONS

- Our office sends a 7-days prior confirmation for all appointments.
- We also send text message reminders and confirmations.
- All appointments must be confirmed 24-hours before the scheduled visit.
- Failure to confirm may result in cancellation of your appointment and could incur a no-show fee.

Patient Initials: _____

TEXT MESSAGE ACCOUNT ALERTS

I hereby authorize Southeast Texas Dental Center to send text message appointment reminders/recall visits, information regarding insurance/billing or communicate with me using my provided cell phone number. I understand that when prompted, I may confirm future appointments using this text messaging service. By accepting these terms, I agree that all individuals associated with my account may receive alerts referencing the account or its dependents. *Text message charges from my cell phone provider may apply (if no text messaging plan)* Patient Initials: _____

Mobile Telephone Number: _____

My signature below indicates that I have read and understand all the terms and conditions above.

Patient Name: (please print) _____

Signature: _____ Date: ____/____/____