

Appointment Cancellation Policy

Dr. August J. Durso, Jr. D.D.S.
1728 E. Kensington Road · Mt. Prospect, IL 60056 · (847) 635-0117

Dear Valued Patient,

Our purpose is to help our patients keep their teeth and gums healthy for life. Proper scheduling of appointments is vital to that endeavor. Therefore, we ask for your cooperation regarding the following appointment policy:

1) Every effort is made to keep on schedule so we respectfully ask patients to be prompt and keep their appointments. We try to remind patients by telephone prior to their appointment, but please do not depend on this courtesy. If we are unable to reach you, your appointment card will serve as the confirmation of your appointment and implies your obligation to be present. That time has been reserved especially for you. This means no other patient has been scheduled for that particular time slot and that anyone else wishing to schedule for that time has had to be given a different time for their appointment. We reserve the right to charge for office visits cancelled or broken without 48 business hours advance notice. Exceptions to this policy can be determined only on an individual basis according to the circumstances. The broken appointment charge will depend on the procedure and time reserved. These charges are allowed by your insurance company but considered as the patient's responsibility to pay.

2) In order to ensure that we keep to our schedule, and yours, as much as possible and to minimize patient waiting time, it is necessary to schedule certain procedures for specific times during the day. This allows us to provide you with the excellence in care that you expect and deserve. We know your time is valuable and that none of our patients want to spend any longer in the dentist's office than they have to. Scheduling specified procedures for specific time slots allows us to be more efficient with your treatment and actually minimizes the time you have to spend at our office.

If you have any questions about the policy, do not hesitate to ask our office staff. We believe that good communication is the key to excellence in dental care.

I have read and I understand the above Patient Appointment Policy, and I have been provided with the answers to any questions I have at this time.

Patient Signature

Date