



Missed Appointment Policy

At Royal Chiropractic Center, your time is valued. Dr. Royal strives to see patients in a timely manner. We respect your time and ask you to respect our time and other patients' needs by keeping your appointment. Each appointment time slot is important and cannot be recovered if a patient chooses not to keep their appointment. We collect fees to ensure that Dr. Royal can continue to see patients. Please keep in mind that each skipped or missed appointment is not just time lost, but also time when other patients cannot be seen.

Please refer to the guidelines below to learn more about our missed appointment policy:

- ❖ **It is your responsibility to provide us with a working telephone number to allow us to communicate important information, such as x-ray results, and provide telephone reminder of scheduled appointments. Having a valid telephone number is truly important; please help us to maintain your records.**
- ❖ **Effective October 1, 2025 each missed appointment will be flagged and you will receive a notice that you have missed your appointment. In addition, your account will be assessed a \$25.00 missed appointment fee on the 3rd missed appointment. Please note that the fee will not be billed to your insurance**
- ❖ **Any Cancellation not made at least 24 hours before the scheduled appointment is considered a missed appointment and subject to the terms above.**
- ❖ **If you arrive 20 minutes late for your scheduled appointment, without prior notification to our office, this may also be considered a missed appointment. Please remember that communicating with our office is critical to us providing you with quality health care**

We understand that circumstances occur that do not allow you to keep your scheduled appointment. If this is the case, please call and discuss this with the office staff as soon as possible. We will waive the cancellation fee for this appointment as long as you do not have a history of cancellations. Our schedule fills up quickly, and this will allow other patients to fill those slots.

We realize that there are times that you may arrive for a scheduled appointment time and are not able to be seen promptly at your appointed time. Please know that we go out of our way to make certain that this does not happen, however due to patient emergencies or other unexpected incidents, our schedule may occasionally fall behind.

SIGNATUER OF PATIENT _____

SIGNATURE OF WITNESS (STAFF) _____

DATE _____