



Jeffrey P. Haggquist, DO, PLLC
Flexibility, Sports & Rehabilitation Clinic
5506 Connecticut Avenue NW, Suite 27
Washington, DC 20015
Tel: 202-244-8222 Fax: 202-244-7432
www.quistmd.com

APPOINTMENT CANCELLATION POLICY

Our doctor and therapists only see one patient at a time usually for a full hour or hour and a half. Your appointment time is reserved exclusively for you. If you do not show up for an appointment, your Doctor or therapist cannot see someone else. In the event that you cancel your appointment without providing at least 36 hours advance notice, another patient/client cannot be scheduled to replace your appointment time. You may call and leave a message at the office at any time when you realize that you will not be able to make your scheduled appointment.

“No Shows” or appointments canceled without 36 hours notice will result in a CANCELLATION CHARGE of \$195.00 per doctor’s appointment and \$75.00 per therapist appointment. Future appointments will not be made until the Cancellation Charge has been paid in full.

I have read the above and understand my financial obligation.

Signature

Date

Print Full Name

DOB

Witness

Date