

# Orchard Medical Associates, L.L.C.



835 Worcester Street  
Indian Orchard, MA 01151  
Telephone: (413) 439-0609 \* Fax: (413) 439-0623  
**Adult & Pediatric Medicine**

## **NO SHOW AND CANCELLATION POLICY**

### **Cancellation of an Appointment**

In order to be respectful of the medical needs of our Community, please be courteous and call promptly if you are unable to attend an appointment. This time will be reallocated to someone who is in urgent need of treatment. This is how we can best serve the needs of our Community. If it is necessary to cancel your scheduled appointment, we require that you call 24 business hours in advance. Appointments are in high demand, and your early cancellation will give another person the possibility to have access to timely medical care.

### **How to Cancel Your Appointment**

To cancel appointments, please call (413) 439-0609. If you do not reach the receptionist, you may leave a detailed message on the voice mail.

### **Late Cancellations**

Late cancellations will be considered as a “no show”.

### **No Show Policy**

A “no show” is someone who misses an appointment without canceling it 24 business hours in advance of your scheduled appointment. (Example: your appointment is at 3 pm on Tuesday. You need to call by 3 pm on Monday). No-shows inconvenience those individuals who need access to medical care in a timely manner. A failure to present at the time of a scheduled appointment will be recorded in your chart as a “no show”. The first time there is a “no show”, you will be sent a letter alerting you to the fact that you have failed to show up for an appointment and did not cancel the appointment. A copy of the letter will be placed in your file. If there is a second “no show”, a fee of \$25.00 will be billed to your account and sent to your home. This fee covers administrative tasks associated with your appointment. This fee will need to be paid in full before scheduling any further appointments. Three follow-up “no shows” in a 12-month period of time will result in discharge from the practice.

### **No Show Policy for Physicals**

A “no show” is someone who misses an appointment without canceling it 24 business hours in advance of your scheduled appointment. (Example: your appointment is at 3 pm on Tuesday. You need to call by 3 pm on Monday). No-shows inconvenience those individuals who need access to medical care in a timely manner. A failure to present at the time of a scheduled appointment will be recorded in your chart as a “no show”. The first time there is a “no show” for a physical, you will be sent a letter alerting you to the fact that you have failed to show up for an appointment and did not cancel the appointment, and a fee of \$25.00 will be billed to your account. This fee covers administrative tasks associated with your appointment. A copy of the letter will be placed in your file. The reason you get a fee for a first time missed physical appointment is that a bigger block of time is set aside to perform your physical, thus not allowing us to book in at least 2 patients in that slot. This fee will need

**to be paid in full before scheduling any further appointments. Two (2) "no show" physical appointments in a 12-month period of may result in discharge from the practice.**