

Harborside Dental Associates

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~ Broken Appointment Policy ~

Harborside Dental is dedicated to providing quality dental care to all of our patients. We do our best to **respect** our patient's time and make every effort to remain on schedule. Some dental visits can become more complicated than initially anticipated, and emergencies may arise that could possibly delay us. In such a case, every effort will be made to notify you beforehand.

Because we reserve time exclusively for each patient, we ask that you make every effort to keep your reserved dental appointment. If you find that you cannot keep your originally scheduled appointment, we require a minimum 24 hour notification. This will allow your reserved time to be offered to other patients in need of treatment. We ask that you call our office during **business hours** to notify us of any changes that need to be made.

Each time a patient misses an appointment without providing proper notice, another patient is prevented from receiving care. Every effort will be made to contact our patients to confirm appointments. Please understand that this is a courtesy call, text, or email which is contingent on the information you have provided our office. **We do understand that there can be unforeseen circumstances and/or emergencies that may cause reserved appointments to be missed without 24 hours' notice.**

Our new "**Broken Appointment**" & "**No Show**" Fee Policy is as follows:

- If you fail to give our office 24 hour notice of cancellation, or no show for a reserved appointment, Harborside Dental Associates reserves the right to charge a broken appointment fee of \$75.00.
- All broken appointment fees will be billed to the patient and must be paid prior to your next appointment. In order to schedule future appointments, prepayment will be required.
- If you have multiple broken appointments in any 12 month period, it may result in dismissal from our practice.

We appreciate your understanding and consideration regarding our appointment policy and if you have any questions or concerns, please ask.

Initial _____ I have read and understand the broken appointment policy at Harborside Dental

Print Name