Attachment 1 – No-Show Policy for (Insert Name of CHC)

Your dental providers want to make sure that you and other area residents have access to high-quality dental care when you need it. To ensure maximum access to dental services for all of our patients, please be aware of the following Appointment Policy:

<u>Scheduled Appointments</u>: Although we will make every effort to remind you of your upcoming dental appointment by phone or by mail, you are ultimately responsible for remembering your appointment date and time.

<u>Canceling Appointments</u>: If you cannot make your scheduled appointment, you must call us at least 24 hours in advance to let us know so that we can offer your appointment to another patient. Failure to provide at least 24 hours' notice counts as a missed appointment.

Missed Appointments: Because of the critical lack of access to dental services in our area, missed appointments are taken very seriously. If you miss one appointment, you will be documented as having missed an appointment. If you miss a second appointment without proper notice within the same calendar year, you will be placed on "no-show status." In order to continue receiving care from our program, you will be required to write a letter to the dental director stating the following: 1) why you missed the last appointment; 2) why you feel you need another appointment; and 3) that you understand that another no-show visit will result in your discharge from the practice. Failure to write this letter will result in your discharge from the practice.

Please talk to any of the dental staff if you have questions about our No-Show Policy.

and the control and agree to an and any amount of an arrange	
D (; (0;)	
Patient Signature	Date
•	
Parent/Guardian Signature (for patients under 18)	

I understand and agree to abide by this No-Show Policy.