

Appointment Cancellation Policy

Our goal at SmilesNY is to provide quality dental care in a timely manner. We do understand that illness, emergencies, and bad weather do occur. However, we ask that patients adhere to our cancellation and no show policy. The policy enables us to better utilize available appointments for our patients in need of dental care. We appreciate your understanding and consideration regarding our cancellation policy.

CANCELLATION OF AN APPOINTMENT

In order to be respectful of other patients' needs, please be courteous and call our office promptly if you are unable to attend an appointment. This time will be given to someone who is in urgent need of treatment. We ask that you contact our office two business days (48 hours) in advance to cancel or reschedule your appointment.

NO SHOW POLICY

A 'no show' is an appointment that was not canceled in advance (minimum of 24 hours in advance). No shows inconvenience other patients who need dental care. A 'no show' for a scheduled appointment could result in a fee.

LATE ARRIVALS

In an effort to serve our patients in a timely manner, we ask that you are on time for your scheduled appointment. In the event you are running late, please call the office. If you are more than 15 minutes late to your scheduled appointment, you may be asked to reschedule.

Thank you for choosing SmilesNY for your dental needs. We look forward to a long lasting relationship with you.

ACKNOWLEDGEMENT

My signature be	low indicates t	hat I have read	, understand a	nd agree to th	e appointment
policy above.					

Signature of Patient or Legal Guardian	
Print Name of Patient or Legal Guardian	Date