

ASI SURGERY CENTER, INC.

RESCHEDULING/CANCELLATION POLICY

We understand that some circumstances are unavoidable, and we will make every effort to accommodate your schedule. If for any reason you need to cancel or reschedule your procedure please notify the office as quickly as possible at (818) 907-7546.

If we are notified of a change to your scheduled surgery **MORE THAN 2 WEEKS PRIOR** to your appointment, we will be happy to provide a full refund or credit of surgical fees. However, because we are obligated to schedule ancillary personnel and prepare supplies, if you cancel or reschedule **LESS THAN 2 WEEKS PRIOR** of your appointment, there is a non-refundable cancellation fee of \$250.00.

IN CASE OF AN EMERGENCY

We understand that emergencies can happen. If for any reason you are unable to keep your scheduled appointment, please call the office at anytime of the day at (818) 907-7546. We have a voicemail system accessible to you 24 hours a day which is checked at the start of each work day.

Once again thank you for choosing ASI Surgery Center. We look forward to serving you

By signing below you acknowledge that you understand the reschedule/cancellation policy and agree to the terms of the policy.

Patients Signature

Date

Witness Signature

Date

Your surgical procedure is scheduled for: _____ @ _____

Pt Name
DOB