

Kenneth E. Wood, MD Ben J. Garrido, MD

Dear Patient,

We are privileged to provide you quality healthcare services and reserve a time in your provider's schedule just for you. In consideration of others, we require at least 24 hour notice prior to cancellation of an appointment. A cancellation or no show fee of \$25 will apply if our office is not notified that you will be unable to make your appointment.

Our patient schedule fills quickly and cancelling with less than 24 hour notice does not allow us enough time to schedule another patient in need of treatment. We do understand that there are circumstances that may prevent you from keeping your appointment. By providing us with as much notice as possible you appointment can easily be made available to another patient who is in need of care.

Patients who are running late are asked to call the office as soon as possible to confirm that their scheduled appointment will be honored. Patients who are more than 15 minutes late for their appointment may be asked to reschedule to another day and/or time in consideration of other patients who have scheduled appointments.

Missed appointment fees must be paid in full prior to being seen by your provider.

We greatly appreciate your cooperation with our office policy. Our goal is to improve our patient care by increasing access to our physicians and better accommodating our scheduled appointments.

My signature acknowledges that I have been informed of this policy.

Sincerely, Lake Norman Orthopedic Spine Center 170 Medical Park Road Suite 102 Mooresville, NC 28117 704-660-4750