

No-Show and Cancellation Policy

At OMSCNJ, our goal is to provide high-quality medical and surgical care in a timely manner. We understand that unexpected events happen; however, missed appointments create gaps in our schedule that could have been used to treat other patients in need.

To help us serve all patients efficiently, we require **at least 24 hours' notice** for any appointment cancellations or rescheduling requests.

Cancellation and No-Show Fees

If you do not show up for your scheduled appointment, or if you cancel/reschedule with **less than 24 hours' notice**, your account will be directly assessed the following standard fee:

- **Consultation Appointments: \$75.00** missed appointment fee
- **Surgical Procedures: \$125.00** missed procedure fee

Important Policy Terms

- **Insurance Coverage:** Please note that insurance companies **do not cover** [no-show or cancellation fees](#). You will be personally responsible for paying this fee out of pocket.
- **Outstanding Balances:** Any assessed cancellation or no-show fees must be paid in full prior to scheduling or attending your next appointment.
- **Late Arrivals:** Arriving more than 15 minutes late to your appointment may result in the need to reschedule. If rescheduled due to a late arrival, it may be treated as a late cancellation and subject to the fees outlined above.
- **Exceptions:** We understand that true emergencies happen. Fees may be waived on a case-by-case basis at the discretion of management for documented medical or family emergencies.

Patient Acknowledgment

By signing below, I acknowledge that I have read, understand, and agree to the terms of the OMSCNJ No-Show and Cancellation Policy.

Patient Name (Printed)

Patient Signature Date
