



Robert L. Oakeson, PT
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At **OAKESON PHYSICAL THERAPY** we are considerate of your time and schedule; therefore, you will be seen at your appointment time. In order to do this, we cannot over book our schedule as some other medical professionals do to account for no show and cancelled appointments. We must pass the responsibility of keeping appointments on to you.

There will be a \$40.00 charge for a no-show or if the appointment is cancelled less than 24 hours prior to the scheduled time. We understand there will be emergencies and/or situations where a phone call may not be possible, and we will handle those situations appropriately.

A no-show appointment will result in the CANCELLATION OF FUTURE APPOINTMENTS.
PLEASE RECONFIRM ANY APPOINTMENTS YOU MAY HAVE MADE.

Thank you for your cooperation and allowing us to maintain our current policy of treatment. We are looking forward to working with you.

Initials of responsible person_____