

The staff at Edisto Dental Associates is committed to providing our patients with the best care possible. Your clear understanding of our appointment agreement is important to the success of our relationship with you. We are happy to discuss this agreement with you at any time.

Keeping Scheduled Appointments

You may be surprised to know that missed appointments and last minute cancellations are the biggest problems in dental offices. So that we can provide you and your family with their needed treatment, we ask the following from you:

You make every effort to schedule your appointments for a time that you can keep. We require a minimum of 24 hours notice if you must cancel an appointment. There will be a missed appointment fee of \$25 charged to your account if not cancelled within the required time frame or if you do not show up for your scheduled appointment. Because missed appointments send the message that your scheduled appointment and our reserved time are not important, we will discharge your family from our practice should this become a pattern. We will attempt to remind you with a reminder call of your appointment one or two days prior to your appointment, please make sure your contact numbers are updated in our files.

Medicaid Coverage Responsibilities:

- Please bring the Medicaid card to your appointments
- Please notify us if your Medicaid eligibility changes, especially if you have an appointment scheduled. Your notification will allow us to verify coverage so your appointment can proceed as scheduled.

With your support and cooperation, we look forward to taking care of your smile!

Your signature below indicates acceptance of Edisto Dental's Patient Appointment Agreement.

Print Name: _____ Date: _____

Patient or Responsible Party Signature: _____