

Roaring Fork Physical Therapy Patient Guidelines

FEES FOR NO SHOWS OR LATE CANCELLATIONS*

*cancellations within 4 hours of scheduled appointment

\$50.00

No show/late cancellation fees are **NOT billed** to insurance or worker's compensation and are the **responsibility of the patient.**

Payment is due at or before next visit!

Please **check in** at the Front Desk when arriving.

DO NOT head straight to the back.

If applicable, you will be asked to make a **payment** on your account (co-pays, patient supplies, account balance, no show/late cancellation).

Patients only beyond the waiting area due to HIPAA regulations.

Please arrive to your appointment **5 min.** ahead of schedule.
Arriving late affects your therapist as well as other patients.

Please turn off your cell phone or mute it.
If you must make or receive a call, please step outside.

By my signature, I understand and agree to abide by the aforementioned guidelines.

Patient Signature

Date

Patient Name