

Sammy Zakhary M.D., P.C.
Valley Vein and Vascular Surgeons
6591 W Thunderbird Rd Suite D2
Glendale, Arizona 85306

Thank you for choosing Sammy Zakhary M.D., P.C., to meet your specialized needs. We strive to provide you with the highest quality medical care. In an effort to foster a collaborative relationship, we ask that you review our updated financial policy so that you understand your responsibilities in this relationship.

Appointments

_____ **Missed and cancelled appointments** represent a cost to us, to you, and to other patients of our practice who could have been seen in the time set aside for you. We reserve the right to charge a \$50 fee for cancelled or missed appointments. **For cancellations, a 24-hour notice prior to the appointment is required.** Failure to cancel with notice will result in a **\$200 -\$500 charge for surgeries and/or procedures and a \$100 charge per ultrasound.** _____(initial) Multiple missed appointments may result in dismissal from the practice. _____(initial)

_____ If you are late for an appointment, we will do our best to accommodate you. However, it may be necessary to reschedule your appointment to a later time or, if non-urgent, to another day. As a courtesy, we email, text, and call to remind parents about their appointments. You will be responsible for a missed appointment charge if an appointment is missed.

_____ **After 2 No Shows**, you will automatically be discharged from our practice and assume responsibility for your health.

_____ I acknowledged that failure to return or rescheduling physician recommended follow-up appointments and/or vascular studies could result in health consequence.

All Medicaid patients

Per Arizona Statue 36-2930.01, if a member misses and appointment without cancelling the appointment before the time for which it is scheduled, the patient will be charged a \$25 no-show fee and will not be scheduled until that amount is paid. _____(initial)

Signature of Patient or Patient Representative

Date