



Medical Clinic of Houston, L.L.P.

Martin R. White, M.D., Managing Partner
Karen C. Rainey, J.D., C.M.P.E., Executive Administrator

1701 Sunset Boulevard
Houston, Texas 77005
Phone (713) 526-5511
Fax (713) 520-4797
www.mchllp.com

Policy for late cancellations and “no-show” patients for Gastroenterology procedures

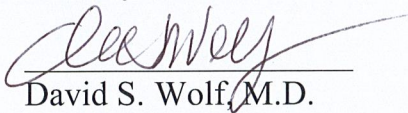
When we schedule your gastroenterology procedure, we are reserving the physician’s time, staff time, anesthesiologist’s time, and a procedure room for you and your particular medical needs. If you cancel at the last minute or do not appear for your scheduled procedure, we generally cannot use this time to provide care for another patient.

Effective November 15, 2022, we will charge a \$100 fee if you cancel your procedure with notice of less than three business days (72 hours) or if you do not appear for your procedure. We will ask that this fee be paid prior to scheduling any future appointments or procedures with a MCH gastroenterologist. This fee will not be covered by your insurance and will be due from you directly.

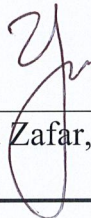
It is not our intent to be punitive but, instead, to ensure that (a) you are not compromising your care, and (b) we are able to care for all of the patients who need our care. If we know in advance that there is an opening, we can fill that appointment slot with another patient who has a medical need.

We appreciate your understanding.

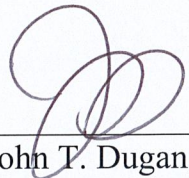
Thank you,



David S. Wolf, M.D.



M. Behzad Zafar, M.D.



John T. Dugan, M.D.

By signing below, you acknowledge that you have received and understand this policy

Patient signature

Date

Printed name

For office use only:

Attestation that this information was relayed orally to the patient and that the patient expressed understanding.

Patient name and DOB

MCH account #

Staff member signature

Date

Witness name/signature

Date