



Cancellation/No Show Policy

Patient Name: _____

Welcome to Outpatient Rehabilitation at White Plains Hospital. We feel fortunate that you have chosen our practice and look forward to assisting you achieve your goals.

Cancellations: While we do appreciate that circumstances may occasionally arise that impact attendance, consistent participation will be important to your recovery. Should you be unable to keep your scheduled appointment, please let us know as far in advance as possible (at least 24 hours) by calling (914) 681-1116. If you cancel more than three sessions in a row, you will need to speak with your therapist about stopping therapy until you are able to keep regular appointments. Since successful therapy requires regular attendance, patients with chronic cancellations may be discharged at the therapist's discretion. To avoid this, please remain in contact with your therapist to discuss the best plan for all.

No-Shows: If you fail to show without calling to cancel your appointment three times, you will be discharged from therapy. A letter will be sent to your referring physician, and/or case manager involved in your care, with the reason for the discharge.

If you have been discharged from therapy, a new prescription will be required to begin again.

We encourage you to discuss any potential attendance issue with your therapist and thank you in advance for your cooperation.

I have read and understand the above information.

Patient Signature: _____

Date: _____