



TERRY J. DUBROW, M.D., F.A.C.S.

NO SHOW/CANCELLATION POLICY

Due to high demand of service, all appointment No Shows and Same Day Cancellations, scheduled with Terry Dubrow, M.D and Jacqueline Brambila, PA-C, will be charged a fee of \$100. All cancellations must be done 72 hours (three business days) prior to the scheduled appointment time to avoid this fee. We understand that health issues may arise, if this is to happen, we require that you provide a Doctors/Hospitalization note.

By signing this document, you have acknowledged that you understand the service fee for No Show/Same Day Cancellations and authorize the credit card below or the card on file to be charged. Thank you for your understanding and cooperation.

Sincerely the office of,
Terry Dubrow M.D., F.A.C.S.
Jacqueline Brambila, PA-C

Please use the card on file from scheduling my consultation appointment

Credit Card Type: ___ Visa ___ MasterCard ___ Discover ___ Amex

Credit Card Number: _____

Expiration Date: _____

Card Identification Number: Last 3 digits located on the back of the card (CCV): _____

Patient Signature

Date

Staff Signature

Date