

**PHYSICAL & SPORTS THERAPY SERVICES OF ST. LOUIS
CERTIFIED McKENZIE CLINIC**

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TO OUR PATIENTS REGARDING CANCELLATIONS AND NO-SHOWS:

The following are our policies regarding cancellations and no-shows. We take this subject seriously, because it can make the difference between whether you succeed in your treatment or not. Your referring doctor and/or your therapist have prescribed a set frequency of treatment. Showing up as scheduled for these visits is your most important job. Other than that, all you need to do is follow your therapist's instructions and we will be able to help you achieve your goals in treatment.

- ◆ We require 24 hours notice in the event of a cancellation. Please have an alternative day and/or time in mind that will ensure you get the full-prescribed number of treatments that week.
- ◆ If you do re-arrange your appointment, you may need to see a therapist other than the one who normally treats you. All of our therapists are experienced professionals. They will study your chart and you will be in good hands. You will then return to your original therapist on your next regularly scheduled visit.
- ◆ Please understand that your pain will probably increase and decrease as your treatment progresses and before it is finally released. Either condition can seem to be a reason not to come in: a) you're feeling worse and think the treatment is not working, or b) you're feeling better and it's a great day to go to the lake. Neither of these conditions are legitimate as a reason not to come: a) if you are in pain, come in and get it relieved, b) if you're out of pain, now's the time that we can begin doing some real correction of the underlying causes of your problem, educate you so you won't re-injure yourself, etc.

When a patient does not show as scheduled, three people are hurt: You, the patient, because you don't get the treatment you need as prescribed by the doctor and/or PT; the therapist who now has an open space in their schedule since the time was reserved for you personally; and another patient who could have been scheduled for treatment if there had been proper notice.

Please co-operate with us in this regard so you will be able to get optimal results from your physical therapy. We're looking forward to working with you.

Patient's Signature

Date