



1105 Independence Drive  
West Plains, Missouri. 65775  
Phone: 417-372-8090  
Fax: 417-256-0882

## Cancellation/No Show policy

Thank you for choosing Progressive Therapy Solutions, LLC as your Occupational Therapy provider.

We are sincerely dedicated in assisting you in meeting your therapy goals. In order to do this, it is important that you attend all scheduled therapy appointments. Consistent attendance allows you and your therapist to progress your treatment program which will result in quicker recovery and better outcomes.

We realize that there are times when unforeseen circumstances make it impossible to attend your scheduled appointment. If this happens, please give us 24 hours in advance so we can reschedule your appointment and open that time slot for another patient. If you are a workcomp client, it is Progressive Therapy Solutions, LLC responsibility through written contract with the workcomp insurance companies to report any reschedules, cancellations, or no shows by you to them for any reason. If you are calling after hours you may leave a message at 417-372-8090. Canceling an appointment with short notice or no-showing an appointment takes up clinic time that could benefit another person; therefore, a \$25.00 no show fee will be charged to the client themselves and not to the insurance company.

We take these policies seriously because when a patient misses an appointment, three people are adversely affected:

1. You, the patient – for not receiving the treatment you need.
2. Your therapist – as he or she has a gap in the schedule.
3. Another patient – who could have had your appointment time.

Please understand your pain may fluctuate as your course of treatment progresses and before you complete therapy. Having pain or not having pain are NOT reasons to cancel or fail to show for your schedule treatment. If you are in pain, it is important to return to see your therapist, as there are treatments available and/or program modifications that can help lessen your pain. Likewise, if you are experiencing less pain, it is important to continue your course of treatment to correct the underlying causes of your injury which will prevent future setbacks.

We want to make your Occupational Therapy experience as beneficial as possible and your commitment is a very important part of this. If you know you are going to have a difficult time making your appointments, please discuss this with your therapist. We will try to accommodate your needs.

Thank you.

Patient Name (print): \_\_\_\_\_

Patient/Legal Guardian Signature: \_\_\_\_\_