

CASTLE ROCK
3750 Dacoro Lane, Suite 130
Castle Rock, CO 80109
Phone: 303-870-8242
Fax: 3997-2145



AURORA
1302 S. Chambers Rd.
Aurora, CO 80017
Phone: 303-880-8095
Fax: 3997-2145

www.peakperformanceptst.com

CANCEL/NO SHOW POLICY REVIEW

Peak Performance family,

We thank you for your commitment and attendance at our clinics. We set aside staff, space, and equipment for each of your visits to ensure the highest level of care possible. When an appointment is missed or cancelled with little notice, we miss out on the opportunity to serve you or another patient with the resources we've set aside.

OUR COMMITMENT TO YOU

- You will receive an email reminder 24-hours before your next appointment OR
- You will receive a text message reminder the day before your next appointment OR
- You will receive a printed list or written appointment card when requested in the clinic

YOUR COMMITMENT TO US

You will attend your appointment at your assigned time or text/call/email to reschedule:

- by 8am the day of your appointment if you are scheduled after 12:45pm
- by 4pm the day before your appointment if you are scheduled the following day

If our commitment to you has been met but your commitment to us has been broken, you will be charged the \$50 cancel/no show fee agreed to in your intake paperwork. This fee is not covered by insurance, and should be paid prior to your next appointment. Multiple missed appointments without notice in any 12-month period may result in discharge from our practice.

Thank you for your understanding and cooperation as we strive to best serve the needs of all of our patients.

Respectfully,

The Peak Performance PTST Team