



**Ellen Ervin**  
(1961-2012)

**Physician Assistant**  
*Kristine T. James, PA-C*

**Physical Therapist**  
*Tara Cepaitis, MS, PT*  
*Matthew Shiomichi, PT, DPT*  
*Teresa Simpson, MPT*  
*Audra Smith, MPT, SCS, CSCS*  
*Kristen Templin, PT, DPT*

**Practice Administrator**  
*Charlotte Higgins*

**Physical Therapy Cancellation/No Show Policy**

Please notify our office as soon as possible if you must reschedule your physical therapy appointment. Twenty-four (24) hour notice is appreciated and voicemail is available if you must call after office hours.

If a cancellation is made the same day as the appointment, a \$50 charge will apply. Missed appointments (no shows) without notification will be charged \$50 as well. The cancellation and no show fees will be charged to the patients account, not to the insurance company. We will consider any reasonable excuses given to justify the late cancellation or “no show”.

After three “no shows” or a pattern of late cancellations, you will no longer be able to schedule in advance and will have to call either the day before or morning of the appointment day requested to be worked in if possible. We regret that we have to institute this policy and appreciate your understanding and for choosing us for your rehabilitation.

This applies only to our physical therapy department.

I understand the above policy and accept my responsibility for my appointments.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date