Miriam Greene, M.D.

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Cancellation and No Show Policy

Thank you for choosing Dr Miriam Greene as your provider. We are pleased that you have entrusted Dr Greene with your healthcare. In doing so, you can be assured that she is committed to providing you with the best medical care possible.

Cancellations:
It is important that we see our patients on their assigned appointment date and time. To cancel an appointment our office requires 24 hours notice. Failure to provide this notice will result in a charge of $75.00.

No Shows:
Our practice will charge a fee up to $75.00 if you do not show up to your appointment on the assigned date and time.

By signing below, I hereby acknowledge receipt of Dr. Miriam Greene's Cancellation and No Show policy.

_____

First Name MI Last Name

_____ _____

Signature Date