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CANCELLATION AND NO SHOW POLICY

Thank you for trusting your medical care to us here at Advanced Cardiovascular Associates, PLC. When you schedule an appointment with our office we set aside time to provide you with the highest quality care. Should you need to cancel or reschedule an appointment please call us as soon as possible so that we have time to schedule other patients who may be waiting for an appointment. If you call less than 24 hours in advance to cancel an appointment OR if you do not call to cancel an appointment and then do not show up at your scheduled time you will be charged a fee.

****These fees are not covered by insurance and is therefore the sole responsibility of the patient****

Below is the fee list:

Office Visit: \$25	Venous Doppler: \$45
Echocardiogram: \$45	Arterial Doppler: \$45
Stress Echocardiogram: \$45	Abdominal Ultrasound: \$45
Routine Stress test: \$45	Renal Ultrasound: \$45
Carotid Doppler: \$45	
Nuclear Stress test: \$250 (cost of the drug)	

Printed Patient Name

Date of Birth

Patient Signature

Today's Date