
INFORMATION SHEET

TO: ALL PATIENTS
FROM: DR. JEFFREY L. GENIK
RE: CANCELLATIONS, MISSED APPOINTMENTS, MEDICAL REPORTS,
OUT-OF-OFFICE CORRESPONDENCE

I am a self-employed medical practitioner. I receive my money for services rendered to you, by sending an account in your name to the provincial health plan (OHIP). Therefore, if you fail to appear, or you cancel your scheduled appointment, without sufficient notice so that I may offer that appointment to someone else, I do not receive payment. It is unlawful for me to bill the provincial health plan without rendering a service to you in person.

I charge for missed appointments and cancellations. If you have a confirmed appointment time or a regularly scheduled therapy appointment, those times are reserved for you and will not be offered to anyone else unless you ask me to do so. I charge for missed or canceled appointments regardless of the reason for the cancellation or the amount of prior notice. This includes appointments which are canceled or missed because of illness, inclement weather, family commitments, vacations, work or school commitments, etc. Thus, I will not accept financial responsibility for you canceling or missing an appointment regardless of the cause or the amount of prior notice. I will send you an invoice and you must pay me directly by cash, cheque or *preferably email transfer*. I will not see individuals and therefore the absence of one member of a couple constitutes a cancellation. I will only see families if two or more members are in attendance. If I see someone else in your reserved time slot, I will not charge you for that appointment.

The actual charge to you will be the appropriate fee that OHIP would allow for that duration of service. I would be happy to discuss the actual fee with you

In the event that you give notice, it is your responsibility to receive confirmation from me directly, either by phone or e-mail, of that notice.

Prior to being billed in such instances, our governing body, the College of Physicians and Surgeons of Ontario, requires that this notice be presented to you in writing for discussion. You may indicate that you have read this document and agree with it by initialing at the bottom of this page and signing it on the next page.

_____ _____ INITIALS

CANCELLATIONS, MISSED APPOINTMENTS, MEDICAL REPORTS, OUT-OF-OFFICE
CORRESPONDENCE

The preparation of medical reports to satisfy third party requests is not a service covered by OHIP. This includes, but is not limited to, reports prepared for employers, insurance companies and lawyers. The cost for preparation of such a report will be based on the time spent preparing the report and other ancillary costs related to its preparation. An estimate of the approximate cost will be discussed with you prior to the preparation of the report. **The financial responsibility for payment of the report rests with you.**

My services to you include **office-based consultation only**. I do not provide any telephone or e-mail consultation. **My telephone or e-mail contact with you will be limited to scheduling issues only. Discussions of clinical relevance will not be addressed outside of the office and all such correspondence will be revealed to all parties.**

If you require urgent attention, you should contact your Family Doctor. If you are experiencing a crisis or an emergency situation, you should visit the emergency room of your nearest hospital.

Fees for uninsured services, which include missed or canceled appointments, are tax deductible medical expenses

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_____	_____	_____
NAME (PLEASE PRINT)	SIGNATURE OF PATIENT	DATE