Virender Sodhi, M.D. (Ayurved), N.D.
Shalinder Sodhi, B.A.M.S., R.D.M.S., N.D.
Anju Sodhi, B.A.M.S., N.D.
PANCHA KARMA TECHNICIANS:
Amy LeMay

2115 - 112th Ave NE, suite 200
Bellevue, WA 98004-2946 | USA
425.453.8022 · Fax 425.453.1408
reception@ayurvedicscience.com
ayurvedicscience.com

MISSED OR LATE APPOINTMENT POLICY

I am fully aware that: Dr. Virender Sodhi, Dr. Shailinder Sodhi, and Dr. Anju Sodhi allow a specific amount of time for my treatment, and if I am late for my appointment, my treatment duration may be adjusted to conform to the respective doctor's treatment schedule.

In case I am late for Spa Services or Panchakarma treatment appointments and do not notify anyone, I acknowledge that I will bear the financial responsibility for this.

As an existing patient, I agree to provide at least **24 hours' notice** if I need to cancel or reschedule. If I fail to do so, I will be charged a **$140 fee** for missed or late cancellations. For **new patients**, a **48-hour notice** is required, otherwise, I agree to pay the **$265 fee** that applies to missed appointments.

These fees are **not covered by insurance** and will be my responsibility. I also acknowledge that I am financially responsible for all services provided and that **full payment is due at the time of service**. Any outstanding balances may incur finance charges.

I understand past-due amounts will be subject to finance charges.

X _____
Signature of Patient

X _____
Signature of Responsible Party (if not patient)

Printed Name of Patient & Date

_____

Printed Name of Responsible Party & Date

_____