



95 Chambers Street • New York, NY 10007
 Tel 347.557.8368 • Fax 646.304.1278 • info@enttribeca.com

Please read the following office policies and procedures. Please initial next to each number and sign at the bottom.

1. Our goal is to maintain a pleasant patient care environment. You will find our staff to be kind, friendly, and accommodating. Abusive language or behavior toward staff will result in dismissal from the practice.	
2. In fairness to other patients and the doctor, we require at least 24 hours notice to cancel appointments.	
3. We strive to see patients at their scheduled appointment time. Therefore, if you are more than 15 minutes late, you may need to reschedule your appointment.	
4. All payments for cosmetic services are due in full at the time of service.	
5. We may bill your insurance carrier if you have Out-Of-Network Benefits and if proper paperwork is provided to us. This does NOT apply to cosmetic procedures. If we receive incorrect or outdated information, the claim may be rejected. We will provide you with an itemized receipt so that you may then bill your insurance company directly.	
6. You are responsible for research and understanding your specific insurance plan. Specifically, you will need to know the terms of your Out-of-Network Benefits, including any deductibles due. If a particular service or diagnosis is not covered by your insurance, you will be responsible for covering the professional fees associated.	
7. If your insurance information changes during your treatment, it is your responsibility to notify us immediately. If the information changes, and the claim is rejected, professional fees are due from you.	
8. Bounced checks result in bank penalties. Therefore, there will be a \$50 service fee for all bounced checks.	
9. Outstanding bills may be sent to collections 90 days after the due date. If your bill is sent to collections, you shall be required to pay all fees, in addition to those charged by the collection agency.	
10. Payment for surgery is due 24 hours prior to the procedure. If you are paying by check, payment is due 3 business days prior to the procedure.	
11. All procedures (cosmetic and surgical) will be done only at the discretion of this doctor after a consultation.	
12. Bloodwork, pathology specimens, and cultures must be sent to outside laboratories for processing. This processing incurs separate fees that are between you, the laboratory, and your insurance company. Our practice is not responsible for these fees and has no authority to intervene on your behalf.	
13. Surgeries performed in the hospital must be canceled at least 24 hours prior to the procedure. If the surgery is cancelled within 24 hours, the surgeon's fee is non-refundable. The hospital fee policies may vary.	

I, (please print) _____, have read, understand and agree to the above office policies & financial disclosures.
 Signature _____ Date _____