

## Financial Policy

Healing Paws Veterinary Clinic requires payment in full at the end of your pet's examination Payment Options:

We accept the Following payment methods:

- **Cash**
- **Major credit cards including:** Visa®, MasterCard®, American Express® or Discover Card®

**\*\*All services and procedures performed within the hospital are non-refundable. \*\***

### **Admitted patient financial policy:**

#### ***Scheduled surgical and hospitalized procedures require:***

- Scheduling deposit of **\$150.00** (will be applied to account balance)
- Remaining account balance must be paid in full at patient discharge
- An estimated total cost may be requested if one is not already provided for you

### **Cancellations, rescheduling and No Show Policy:**

The hospital requires a minimum of **24 hours** for appointments and **72 hours** for surgical procedures to be notified for appointment cancellations, and/or need to reschedule. **A late cancellation fee will be applied if not made within the time limit.**

### **No Show fees are as follows:**

- Surgery/anesthesia appointments will be charged a **\$150 no show fee.**
- Regular appointments will be charged a **\$70 no show fee.**

**By signing below, you understand and agree with the policies and terms above:**

## Clinic Policy

### Hospital waiting and lobby policy:

- To keep all clients, patients, and clinic staff safe, all pets must be in a **pet carrier**, or **leashed**. Please keep retractable leashes locked at a reasonable distance.
- Children **under the age of 14 years** must be attended by an adult in both the waiting/lobby and exam rooms at all times.
- Clients (patient's owner) must be on hospital premises for the duration of the patient's exam. (Exception for admitted hospitalized patients) If violated, a care fee of **\$100.00** may be applied.

### Clients that are 10 minutes late for their scheduled appointment will have the option to:

- **Reschedule appointment** (Late cancellation fees may apply- **see** financial policy)
- **Wait to be seen** (if the hospital's schedule allows), patients will be seen at their scheduled appointment, all other patients will be seen when time permits. A **\$30.00** late fee may be applied to the overall invoice as well.

### Admitted and Hospitalized patients

- Rabies vaccination **must be current**. If needed, the rabies vaccine will be updated upon admittance (unless precluded by illness)
- Admitted hospitalized patients will be treated if **fleas, ticks**, and/or **ear mites** are present, fees will apply.

### Prescription/ medication request Policy

- Prescription Refill requests require a **24 Hour** notice for the Doctor's authorization.
- Per "The National Association of Boards of Pharmacy and FDA Compliance Policy Guideline 7132.09" all unused prescription and/or Over the Counter products purchased, or prescribed from our clinic are non-returnable, with the exception of prescription food and preventives.

**By signing below, you understand and agree with the policies and terms above:**