

WVCWG OFFICE POLICY *Effective October 1st 2020

*Please return all online forms **24 hours prior** to your new assessment appointment. Thank you!*

New Assessment Appointments - I understand that others may be on a waiting list for my appointment time and therefore I agree to give **48 hours notice** prior to cancelling my new assessment appointment for any service. I understand that new assessment cancellations under 48 hours will be subject to the **full appointment fee** and will automatically be processed to the credit card on file or billed to me directly.

Same Day Cancellations/Reschedule Of Follow-Up Appointments

I understand I must call **the day prior to my appointment** in order to cancel or reschedule my appointment to a different day. Same day cancellations/changes will be subject to **half of my appointment fee** and will automatically be processed to the credit card on file or billed to me directly

Missed Appointments

I understand if I miss my scheduled appointment without notifying the office prior to my appointment, I will be subject to the **full appointment fee** and will automatically be processed to the credit card on file or billed to me directly.

Late Appointments

In the event I am late for an appointment that requires a specific amount of time blocked off for me with my practitioner (for example, 30 min acupuncture, 1 hour massage etc), I understand that the treatment will be rendered until the end of my scheduled appointment time and I agree to pay the **full visit fee** for which I was booked. Late appointments of this nature where I arrive *after* the end of my scheduled time slot will be considered missed appointments.

Exceptions to Missed/Cancelled/Rescheduled Fees

1. Please let us know if you have had extenuating circumstances the same day as your missed/cancelled/rescheduled appointment; such as illness or hospitalization of self; illness or hospitalization of an immediate family member; if you are experiencing any symptoms of COVID 19; or have been made aware that you have been in contact with someone with COVID 19.
 2. If you are in labour and/or have had your baby on the day of your missed appointment please do not worry about your missed appointment. We are aware of your circumstance and no fee will be billed.
 3. When you are pre-booking your appointments please let us know if you have any special conditions or employment that may require you to reschedule or miss a same day appointment. For example, on call emergency personnel.
- In addition, if we are able to reschedule your appointment with the same practitioner on the same day there will be **no fee** for your same day rescheduled appointment.

We Understand Life Happens..

I understand I will be given **one grace missed appointment AND one grace same day cancellation/reschedule** per calendar year after which payment will be automatically processed/billed.

Appointment Reminders

I understand that appointment reminders are solely a courtesy and that I am fully responsible for my booked appointment time regardless of whether or not I receive an appointment reminder.

Reassessments For Change In Status Or Prolonged Absence

I understand that my doctor/therapist may be required to do a reassessment of my condition/health/nervous system if significant time has passed since my last appointment or if I have a change in status. In these situations I understand that my doctor/therapist has a professional obligation to reassess my health in order to provide me with the best care possible. This may include a change in my treatment plan to ensure it is safe, effective and appropriate for my health. Reassessment fees are outlined on the attached fee schedule and may take longer than my regular treatment appointments.

A) Change In Status:

Upon booking my appointment I agree to inform the front desk Wellness Assistants if there has been a change to my health status that may require the doctor/therapist to spend more than the normal allotted treatment time such as: **a new injury, new area of complaint, or a significant change in my symptoms or medical status (new diagnosis)**. If you are unsure as to whether the doctor or therapist will need extra time to reassess you then please do not hesitate to ask

B) Prolonged Absence:

I understand that when I return to care after a prolonged absence, as outlined below, I will be booked for a reassessment appointment with my doctor/therapist to ensure my care is safe and effective. My doctor or therapist may or may not need to reassess me and will make that final determination in my appointment:

Chiropractic and physiotherapy: **3 months**

Acupuncture: **6 months**

Naturopathic medicine: **9 months**

Massage Therapy: **12 months**

COVID-19

I agree to inform Waterdown Village Chiropractic and Wellness Group if I am experiencing symptoms of COVID-19 or have tested positive for COVID-19 on the day of my booked appointment. I agree that in the event of illness due to COVID-19 or if I am experiencing symptoms of COVID-19, that I may not come for my booked appointment and I must inform reception by phone or e-mail. I further understand that my appointment will be rescheduled 14 days from the onset of my symptoms or upon 24 hours after resolution of my symptoms and a negative test.

Signatures

I understand the office policy above and agree to abide by it including prompt settling of any of the above outstanding fees or any other fees I may have incurred for services rendered to me.

Client Name

Signature (and/or Signature of parent or guardian)
*electronic typed signature constitutes my signature

dd/mm/yyyy

CC _____ - _____ - _____ - _____ Exp _____ / _____ CVV _____

I understand that the above missed and same day cancellation/rescheduled fees will be automatically charged on my credit card as provided. I understand that automatic processing of my credit card will not be used for any other purpose unless requested by me.

Signature of card bearer

*electronic typed signature constitutes my signature

CLINIC FEES & HOURS: (As of October 2020)

It is the patient's responsibility to cover the total cost of all fees related to their care. The fees offered by this office are designed according to specific qualifications of your practitioner and are well within the recommendations set by the Ontario Chiropractic Association, Canadian Association of Naturopathic Doctors, College of Physiotherapists of Ontario, and Registered Massage Therapists' Association of Ontario.

CHIROPRACTIC

Initial Examination:

ADULT	\$100.00
CHILD	\$120.00
SENIOR	\$85.00
STUDENT (Univ./College – Full-Time)	\$85.00

Subsequent Visit:

ADULT/CHILD	\$45.00
SENIOR	\$38.00
STUDENT (Univ./College – Full-Time)	\$38.00
HOME VISIT	\$85.00
FAMILY PLAN (4+ under reg care)	\$40.00

Other:

REPORT OF FINDINGS	\$65.00
PROGRESS EXAM	\$65.00
RE-ASSESSMENT	\$65.00
(>3 months, new injury, worsening symptoms)	
REACTIVATION	\$85.00
(>1 year)	
CUSTOM ORTHOTICS	\$500.00
ORTHOAEDIC SHOES	\$350.00
ORTHOTIC INSERTS	\$45.95 & UP
MISSED / CANCELLED APPTS	See Policy

NATUROPATHIC MEDICINE

Initial Assessment:

INITIAL ASSESSMENT	\$175.00
INITIAL FERTILITY APPT (Couple)	\$285.00
INITIAL MSK ACUPUNCTURE	\$145.00
FACIAL REJUVINATION + COSMETIC ACUPUNCTURE	\$165.00
B12 INITIAL APPOINTMENT	\$45.00

Subsequent Naturopathic Appt:

REGULAR FOLLOW-UP	\$85.00
EXTENDED FOLLOW-UP	\$100.00
B12 FOLLOW-UP APPOINTMENT	\$20.00
ACUTE APPOINTMENT	\$45.00
ACUPUNCTURE (30-Mins)	\$65.00
ACUPUNCTURE (1-Hour)	\$95.00
PRE-BIRTH ACUPUNCTURE	\$95.00
COSMETIC ACUPUNCTURE	\$140.00
MISSED / CANCELLED APPTS	See Policy

PHYSIOTHERAPY

ORTHOAEDIC ASSESSMENT	\$105.00
ORTHOAEDIC FOLLOW UP	\$78.00
RE-ASSESSMENT AND TREATMENT	\$85.00
PELVIC HEALTH ASSESSMENT	\$140.00
PELVIC HEALTH FOLLOW UP	\$95.00
PELVIC HEALTH BIRTH PACKAGE	\$220.00
MISSED / CANCELLED APPTS	See Policy

MASSAGE THERAPY

all fees include HST

90 MINUTES	\$135.00
60 MINUTES	\$98.00
45 MINUTES	\$83.00
30 MINUTES	\$68.00
MISSED / CANCELLED APPTS	See Polic

CLINIC HOURS:

Mon:	1:30 p.m. to 8:00 p.m.
Tues:	9:30 a.m. to 8:00 p.m.
Wed:	9:30 a.m. to 8:00 p.m.
Thurs:	9:30 a.m. to 8:00 p.m.
Fri:	9:30 a.m. to 3:30 p.m.
Sat:	9:00 a.m. to 2:00 p.m.
Sun:	CLOSED

PLEASE NOTE:

- All office fees are subject to change with prior notice to clients
- Payment is due upon services rendered unless other arrangements have been pre-approved
- No returns on probiotics or open product
- Payments may be made by American Express, Debit, MasterCard, Visa, cash or cheque
- A credit card must be put on file for missed and cancelled appointments
- Virtual visits carry the same fees as in person fees