

**Patrick G. McCabe, D.D.S.**  
**1150 North loop 1604 W., Ste. 118**  
**San Antonio, TX 78248**  
**(210) 492- 8335**

## **APPOINTMENT POLICY**

Dr. McCabe's staff works closely with new and established patients to set appointments that meet the patient's treatment needs as well as their availability. In order for us to best serve *all* of our patients and be the most efficient we can in this area, we need your help to inform us within **48 hours** if you are unable to keep any appointment. We understand that emergencies arise and appointments are occasionally missed. However, **a 48 hour notice is required to avoid a cancellation fee**. A fee will also be charged to patients who do not show up to their appointment without this same 48 hours notice. Thank you; we appreciate your cooperation.

## **FEES:**

**HYGIENE VISIT- \$35**

**DOCTOR VISIT- \$50**

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Print Name

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Signature of Patient (Guardian)

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Date