



# Veterinary Dermatology of New England, Inc.

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## Appointment Policy

At Veterinary Dermatology of New England, we are one of very few dermatology specialty practices in the area and in trying to accommodate all patients, we have the following cancellation policy. We thank you for your help and assistance in achieving our goals and best practices set forth.

- At Veterinary Dermatology of New England, we require a 48-hour cancellation notice
- A missed appointment fee is \$50.00
- Should you accrue a missed appointment fee; you are required to pay the missed appointment fee prior to your next scheduled appointment. An invoice will be sent to you.

Due to the high volume of patients in need, we ask that you arrive on time for your scheduled appointment. We have a full schedule and a late arrival impacts subsequent patients.

*Note: We do reserve the right to refuse service for any client who arrives fifteen minutes late for their scheduled appointment.*

As a courtesy we call to confirm appointments and if we are unable to reach you, we leave a voice message and ask that you return a call back to our office and confirm your scheduled appointment.

*Note: We reserve the right to reschedule your appointment if we do not receive a confirmation call by the day before your scheduled appointment.*

### PAYMENT POLICY

Payment for service is expected at the time services are rendered. As a form of payment we accept; Cash, Personal Check, Money Order, Visa, MasterCard, Discover and Care Credit.

Note: Care Credit card holders must be pre-approved and have card present at time of your scheduled appointment. Applications for Care Credit are not offered at our office. A valid Driver's License or State ID must be present along with one other form of identification when using Care Credit.

### PRESCRIPTION REFILLS

Prescription refills can be called into our office and picked up during normal business hours. Or we offer mailing the prescription refill to you. Our shipping and handling fee starts at \$21.00 and will be applied to your invoice. Additional charges can apply depending on the cost of the medication, insurance to cover the cost, weight, and zip code. If you wish for your pets prescription to be mailed to you, we will need to obtain a valid credit card number from you for payment of the medication, and the S&H fee prior to mailing.

*Note: Most medications can be filled here at our office or called into a **dispensing pharmacy only** of your choice.*

### PICTURE POLICY

Photos are taken of your pet for identification and educational purposes. The pictures may be used on our website, journals, papers, lectures or as teaching aids. By signing below, you agree to our use of your pet's picture.

If you do not want your pet's picture used on our website, in written material or as a teaching aid, please check here.

Not Authorized

Please sign below acknowledging that you have read and understand the above information.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_