



Veterinary Dermatology of New England, Inc.

Laurie J. Stewart
VMD, Diplomate, ACVD

Tel: (978) 399-0100
Fax: (978) 399-0200

25 Carlisle Road
Westford, MA 01886

www.veterinary-dermatology.com

Appointment Policy

Veterinary Dermatology of New England is one of very few dermatology specialty practices in the New England area.

Our goal is to help as many dogs in need that we possibly can. In order to avoid wasted appointment slots, we have implemented the following appointment and cancellation policy:

- A deposit of \$100 will be collected at the time of scheduling. We require a 48-hour notice of cancellation so another patient may be offered the appointment slot. **Deposit is not refundable if at least 48hrs notice of cancellation is not provided.**
- As a courtesy, we will contact you to confirm your dog's appointment. If we are unable to reach you, we will leave a message asking that you contact us to confirm your dog's scheduled appointment. **NOTE:** Veterinary Dermatology of New England reserves the right to reschedule your appointment if we do not receive a confirmation 24 hours before your appointment time.
- Due to the high volume of patients in need, we ask that you arrive on time for your scheduled appointment, as late arrivals impact subsequent clients/patients/appointments.
- **NOTE:** Veterinary Dermatology of New England reserves the right to refuse service to any client who arrives fifteen minutes late for their scheduled appointment.
- **We are not presently accepting new feline patients.**

Important: When scheduling an Initial Visit, or a Recheck Examination, please note that your pet's primary caregiver **MUST** attend the appointment.

The doctor will speak with you in-depth about exam findings, laboratory testing, laboratory test results, and treatment. You will also be given written instructions. There will be a lot of information covered, and it is vital that the primary caregiver is the person that consults with the doctor about their pet. The doctor is unable to go over this information again after the fact by phone or email. A consultation appointment with the doctor is required if the person attending the appointment is unable to convey all the information/instructions to the primary caregiver. We thank you for your cooperation!

PAYMENT POLICY

Payment for service is required at the time services are rendered.

Forms of payment we accept: Cash, Personal Check, Money Order, Visa, MasterCard, American Express and Discover.

PICTURE POLICY

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

If you prefer that your pet's photo is not used as mentioned above, please check below:

I do not wish my pet's photo to be used for any reason, outside of his or her medical record.

PRESCRIPTION REFILLS

Prescription refill requests may be phoned or texted into our office, and medications picked up during our normal business hours.

Phone: 978-399-0300

Text: (Iddex Communicator): 978-355-7097

If you are unable to pick up your pet's medication, we will be happy to ship it to you. Shipping and handling fees start at \$10, and will be applied to your invoice. Additional charges may apply, depending on the cost of the medication, insurance, weight and zip code. Payment will be taken by credit card at the back to accept payment over the phone.

Note: Medications can be filled here at our office, or through chewy.com. We do not provide written prescriptions, and are unable to call medications in to pharmacies.

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

Signature: _____

Date: _____