

LIMB SALVAGE INSTITUTE, LLC



Wound Care on Wheels

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## Attendance Policy Notification

You are an integral part in wound healing. It is our goal to provide you with the quality care to help you achieve your goals. In order to do this, you need to attend all of your scheduled appointments. We will work with you to schedule your appointments on days and times that will best accommodate your schedule.

**We request that you notify our office of cancellation or a need to reschedule 24 hours prior to your scheduled appointment by calling 904/642-0877.**

When you do not show for your scheduled appointments our office will document that you missed your appointment as a “No Show.”

Three (3) missed appointments by cancellation or as few as (1) missed appointment by “No Show” may subject you to consideration for discharge.

A minimum of two (2) attempts will be made to contact you in order to maintain continuity of care and treatment regimen.

I have been informed of this policy:

\_\_\_\_\_  
Printed Name of Patient

\_\_\_\_\_  
Signature of Patient or Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
WMC Representative

\_\_\_\_\_  
Date