

SUFFOLK BEHAVIORAL MEDICINE P.C.
Mulchand Chugh, MD
535 Broad Hollow Road, Suite # B-12
Melville, NY 11747
Tel # 631-513-6262

ATTENDANCE POLICY

Patient Name: _____ Date: _____

For effective treatment to occur, you need to make all your scheduled appointments. If you must miss an appointment you need to call to cancel 24 to 48 hours prior.

If you miss 2 appointments, your treatment at this facility will be jeopardized and you will NOT automatically be put back into the schedule. You will need to discuss this with your therapist and psychiatrist to keep your treatment open here.

Please make good use of your appointments and value the time as we do.

Signature of Patient or Guardian: _____

Print Name of Patient or Guardian: _____

Date: _____