Patient Late Arrival Policy
Effective Date: February 20, 2015

I: Purpose
To promote efficiency of clinic operations and to encourage providers to accommodate the needs of our patients while ensuring fairness to all patients and families.

II: Definitions
- **Scheduled arrival time**: The time at which the patient has been instructed to arrive at the clinic registration desk. This is typically 10-20 minutes before the patient is actually scheduled to begin testing or to be seen by the provider.
- **Appointment time**: The time at which the patient is scheduled to see their provider or begin testing. This is typically 10-20 minutes after the scheduled arrival time.
- **Late Arrival**: A patient is deemed late if they arrive more than 20 minutes after their scheduled arrival time regardless of the length of the scheduled appointment.

III: Policy

1. Families will be notified of the late arrival policy when scheduling their appointment and when reminder calls are made. Appointment reminder cards will also include notification of this policy. “Please arrive at the clinic desk at _____ o’clock on (date). Please be sure to plan your travel accordingly and allow 10 minutes to park and locate your clinic. Out of fairness to other patients, those who arrive late may be asked to reschedule their appointment.”

2. If a patient arrives 20 minutes after their scheduled arrival time, the receptionist will notify the patient or family of the following:
   a. “We will do our best to see your child, but please understand that out of fairness to patients who arrive on time, your late arrival may require us to reschedule your appointment. I will check with your provider to see if your child can be seen today, but you may be asked to wait until the end of clinic and your time with your provider is likely to be shortened.”
   b. The receptionist should then contact the Medical Assistant working with the provider or the Lead Medical Assistant who will in turn ask the provider (when they are available) if the patient can be seen. Factors the provider should consider include: travel distance for the patient, the patient’s age and underlying medical condition, availability of appointments, impact on clinic flow, etc.
   c. If a patient is scheduled for testing (pulmonary function test, echocardiogram, etc.) separate from their clinic appointment, the provider should consider alternatives to both performing the testing and seeing the patient in clinic.
   d. Providers are encouraged to accommodate late arriving patients if this can be done without significant negative consequences to the care provided, other patients or the clinic staff.