**Surgery Center and Medical Spa Services – FINANCIAL POLICIES**

Surgical procedures, injections, aesthetic treatments, and retail products must be paid for in full at the time of service or delivery of goods. All product sales are final. In the case of a documented adverse reaction to any product, an exchange or credit may be issued within 10 days of the original purchase.

**Payment Methods Policy:** Payments for injections, esthetic treatments, prescriptions or products can be made by cash, money order, cashier’s check, and credit card. Payments for surgeries and related deposits can be made by cash, personal check, money order, cashier’s check, ACH or Bank Transfer, Wire Transfer, Credit Card, or approved financial institution arrangements administered by third parties including Care Credit, Alphaeon Comenity Business Center, or United Medical Credit. Personal checks, ACH, or Wire Transfers will only be accepted up to 21 days prior to the scheduled surgery. An additional 5% processing fee will be charged when the payment method chosen is credit card, debit card, or any approved financing company.

**Pricing and Treatment Policy:** The standard pricing of products and services is subject to change at any time without warning or notice. Treatment prices may vary from client to client based on individual programs or recommendations of products or services, tailored for client-specific needs. Treatment programs are non-transferable in part or whole to any other treatment or individual. All pre-payments for any esthetic treatments expire six months from the date of purchase, including treatments such as laser hair removal, Fraxel, IPL, and Microneedling. After the six-month period, unused treatments will be considered forfeited.

**Surgical Date Policy:** In order to secure a date for any surgery procedure, a $1,000 deposit must be paid in full. The remaining balance is due no later than three (3) weeks prior to surgery, typically at the pre-operative appointment. The pre-operative appointment usually occurs no later than 3 weeks prior to the scheduled surgery date. If the pre-operative appointment occurs within three (3) weeks of surgery, payment for the procedure is due in full at the beginning of the pre-operative appointment.

**Cancellation and Reschedule Policy:** If surgery is cancelled or rescheduled at any time prior to 21 days before surgery, a non-refundable cancellation or rescheduling fee of $500 is applied and any remaining surgery deposit balance shall be refunded. If surgery is cancelled or rescheduled within 15-21 days before surgery, an amount equal to 50% of the total surgery fee will be retained by Alderwood Surgical Center. If surgery is cancelled or rescheduled within 14 days of surgery, an amount equal to 100% of the total amount charged on the surgery invoice will be retained by Alderwood Surgical Center. If the surgery is rescheduled due to a documented medical emergency, any remaining surgical deposit less the non-refundable cancellation fee stated above shall be applied to a future mutually agreeable surgery date.

**Refund and Unclaimed Property Policy:** Alderwood Surgical Center LLC shall refund patients for any overpayments for surgical or cosmetic procedures within 60 days of the Company identifying the overpayment. Any overpayment resulting in a refund owed shall be refunded via the original method of payment, when available. A check will be issued when the original payment method is unavailable. Alderwood Surgical Center LLC is responsible for compliance with Washington’s Uniform Unclaimed Property Act and will report any abandoned property at least three years from the date such property came into the Company’s possession. Alderwood Surgical Center complies with both federal and state law by providing notice to patients in writing of any overpayment and refunding any overpayment within 60 days of identifying the overpayment or providing service. Patients will be notified of any overpayment within 30 days of the Company identifying the overpayment. Any refunded amount will be re-issued through the original payment method. If the original payment method is unavailable, a check will be mailed. Every attempt will be made to refund the patient through the original form of payment. In the case of credit card refunds, the customer may be required to verify the card or account information to which the refund will be issued. Gift cards or account credits may be offered at the discretion of the Chief Operating Officer. If a patient credit balance is not refunded within three years, it is considered Unclaimed Property under Washington State Law. Washington’s Uniform Unclaimed Property Act applies to the following situations: (1) The Company is not able to contact the patient after good faith effort has been made to refund the amount overpaid; (2) The Company fails to issue a refund for any overpayment; or (3) A gift card or account credit is not used in part or in full. If any of these situations arise, Alderwood Surgical Center shall report the monies as unclaimed property to the Washington Department of Revenue according to their required deadline of three years from the date such property came into the Company’s possession.

**Delinquency Policy:** Payments for goods and services must be made in full at the time of service or delivery of goods. In the event payment is not made timely, any balance will be subject to a 3% monthly finance charge. Written notice will be provided to the mailing address on file after 60 days and 90 days of delinquency. After 90 days of written notice of delinquency, Alderwood Surgical Center shall act to collect any debt owed, up to and including debt collections and legal action.

**Quote and Fee Estimate Policy:** Our surgical quote is intended to provide an estimate only and is subject to change at the discretion of Alderwood Surgical Center. The fees stated in the quote are estimated costs of any procedures listed on the quote. Any discounts given for the procedural plan are as listed, and any deviation from the original procedural plan may result in a loss of discount. This quote is valid for 90 days from the date signed. The doctor’s quote is inclusive of the following expenses: all operating room/facility fees, doctor’s fees, anesthesia, implants (when applicable), preoperative visits, and postoperative visits. Prices do not include costs associated with prescription drugs, necessary laboratory fees, or additional surgical garments.

Any revisions or touch ups are subject to additional facility, doctor, and anesthesia fees. In the event that Lab Work/EKG/Medical Clearance is required prior to surgery, Alderwood Surgical Center must receive written documentation no later than two (2) weeks prior to the surgery. Otherwise, Alderwood Surgical Center reserves the right to cancel the surgery; please refer to the cancellation policy for more information.

**OFFICE POLICIES**

In order for us to provide all clients with the very best experience and care, please silence your cell phone and please have your children or service animals attended to in the lobby during your visit.

**Late Arrivals:** All appointments have been designed and scheduled to allow the appropriate time for the full enjoyment and proper and careful performance of your service or consultation. Your late arrival may limit our ability to offer the fullest experience possible or may not allow us to perform your service that day. Please understand that we must respect the appointment start times of other clients that have appointments immediately following your scheduled appointment.

“By signing this I certify that I have read and understand all of the above financial and office policies.”

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Patient Name (Please Print)  Patient Signature  Date