

**NOVA Plastic Surgery Financial Policy:**  
**Cosmetic Patients**

**Ashburn Office**  
**21785 Filigree Court**  
**Suite 206**  
**Ashburn, VA 20147**

**Reston Office**  
**1860 Town Center Drive**  
**Suite 255**  
**Reston, VA 20190**

Dear Patient,

Thank you for choosing NOVA Plastic Surgery for your plastic or reconstructive needs. This Financial Policy was developed to assist you in understanding how the billing for your services will be handled and your obligations with regard to billing. If you have any questions, please do not hesitate to consult a staff member.

**CONSULTATIONS:**

NOVA Plastic Surgery offers consultations with Dr. Nukta for \$150, and free consultations with our Physician Assistant. This fee is due up front before being seen for your appointment. Any consultation fee will be applied toward treatments or surgery.

**PROCEDURES:**

If you choose to schedule a procedure, a \$500.00 non-refundable deposit is required to schedule the surgery. The remaining balance is due at least one week prior to surgery. Should you cancel or reschedule your procedure without at least one week's notice, you will incur an additional \$500 cancellation/rescheduling fee. NOVA Plastic Surgery accepts the following forms of payment:



Sincerely,

NOVA Plastic Surgery

**ACKNOWLEDGMENT AND AGREEMENT:**

By signing below, I acknowledge that I have read the NOVA Plastic Surgery Financial Policy. My signature below attests to the fact that I fully understand the Financial Policy and agree to the terms and conditions contained herein.

I understand that if I am under 18 years of age, I am required to have a responsible party over the age of 18 years read and sign this Financial Policy. The responsible party agrees to be bound by the terms of this Financial Policy to the same extent as the Patient.

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Patient Name

\_\_\_\_\_

Patient Signature

\_\_\_\_\_

Date