

General Office Policy Note

Welcome to our practice. We take great pride in providing top quality comprehensive care for our patients. To do this, we carry out an extensive initial evaluation for routine patients. We also perform periodic examinations that include the necessary x-rays (in general: bitewing and anterior periapical films every 6 months, panoramic films every 3 years), periodontal examination (generally once a year), and clinical evaluation. The recommended times for x-rays and periodontal examination will vary depending on the clinical findings and history of each patient.

Patients that are in pain requiring immediate evaluation will be offered a same day appointment. Every effort will be made to provide treatment at that same visit; however, there may be times that we will need a scheduled appointment for the necessary treatment.

We understand that your time is as valuable as ours, so we ask that you adhere to your given appointment time. When patients are late to their scheduled appointments, they cause a domino effect that will, at times, affect the rest of the patients for that day. We ask that if you are going to be more than 10 min late for an appointment you understand that we will, in all probability, need to reschedule your appointment.

We respect your privacy and will not discuss your treatment with anyone unless you have given us express consent. So please be sure to advise the front desk if there are any third parties you wish to have information regarding your treatment and/or the associated costs thereof. They will be happy to provide you with a form you can sign allowing us to do so.

We keep current with OSHA, American Dental Association, and Centers for Disease Control and Prevention (CDC) recommendations on all aspects of patient care including our sterilization protocol.

We treat you as we would ourselves and our family and welcome any questions, comments and/or concerns you may have regarding any aspect of your care or of our office policies.

Date: _____

Signature: _____

Printed name: _____