



## Parent Check List

*Please use the following checklist to help guide you through the process of attending the hospital for dental treatment.*

- Copy of your **medical insurance card** was provided to our office.
- Hospital fee** of \$395.00 paid in full (non-refundable; This fee does not apply to any co-pays, deductibles and/or balances)
- Received **Hospital Info/Insurance Disclaimer Form / Credit Card Authorization Form** (information about in-network/ out-of-network insurance)
- Scheduled a **physical appointment** with your child's pediatrician for medical clearance.

The physical to be completed between: \_\_\_ / \_\_\_ / \_\_\_ and \_\_\_ / \_\_\_ / \_\_\_.

The physical form must to be returned to our office by: \_\_\_ / \_\_\_ / \_\_\_.

*(If not received by the date above, your hospital date may be canceled per Franciscan Hospital)*

- Received **dental insurance estimate of benefits** regarding co-pays/fees.
  - If you do not receive this estimate in the mail from your insurance company or have questions please call 781-934-7111 to inquire about your out-of-pocket cost due 2 weeks prior to your scheduled visit.
  - When you receive your estimate please call our office or visit our website to schedule a payment ([www.duxburychildrensdentistry.com](http://www.duxburychildrensdentistry.com)).

This payment will be due by: \_\_\_ / \_\_\_ / \_\_\_.

- Call Franciscan Hospital for any **medical insurance coverage/questions** at (617) 254-3800 ext.1542.
- Scheduled a **PCR COVID test**. Patient must be tested within **72hrs** of the visit with a PCR test (at home or rapid tests are not accepted). We recommend to test on the Saturday prior to your visit to be able to receive your results on time unless the testing site can guarantee the turn around time by Monday evening. Bring a copy of the negative results with you on the day of the visit. If you receive a positive result, call our office immediately at 781-934-7111.
  - **IMPORTANT: Patients who test positive or previously have had COVID must reschedule 4 weeks from the positive test date per Franciscan Hospital Anesthesiology Dept.**

Scheduled a PCR test on: \_\_\_ / \_\_\_ / \_\_\_

- Franciscan Hospital will call you the day prior with an arrival time as well as when to stop eating/drinking.
- Scheduled a **follow up visit** with our office for 2 weeks after the hospital visit.