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# NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW DENTAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN ACCESS THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

## **Our Pledge Regarding Your Health Information**

We understand that information about you and your health is confidential. We are committed to protecting the privacy of this information. Each time you visit our office we create a record of the care and services you receive. We need this record to provide you with quality care and to comply with legal requirements. This notice applies to all of the records of your care created by any of our health care personnel or Dr. Knutzen.

This notice describes your health care information privacy rights and the obligations Dr. Knutzen's office has regarding how we may use and disclose your health information. Your dental health is an aspect of, and is inclusive of your overall health. Your medical conditions may play a part in your dental conditions. So, when we talk about your health information, we are referring to both.

## **Our Responsibilities**

Federal and California law makes us responsible for safeguarding your personal health information. We must provide you with this notice of our privacy practices and follow the terms of the notice currently in effect.

**Changes to this notice:** We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for health information we already have on file about you as well as any information we receive in the future. We will have a copy of the current notice in our reception room.

## **How We May Use and Disclose Health Information About You**

The following categories describe different ways that we use your health information within our office and disclose your health information to persons and entities outside of our office. We have not listed every use or disclosure within the categories below, but all permitted uses and disclosures will fall within one of the following categories. In addition, there are some uses and disclosures that will require your specific authorization.

**Treatment:** Your health information may be used to provide or coordinate your dental treatment and services. We may disclose health information about you to auxiliary staff, technicians, interns or other allied health personnel who are involved in providing for your well-being during your visit with us. We also may communicate information to another doctor and his/her auxiliary staff for the purpose of coordinating your continuing care.

**Payment:** We may use and disclose your information for billing and to arrange for payment from you, an insurance company, a third party or a collection agency. This also may include the disclosure of health information to obtain prior authorization or payment for treatment and procedures from your insurance plan.

**Health Care Operations:** Uses and disclosures of health information are necessary to operate our dental office and to make sure all of our patients receive quality care. We may use and disclose relevant health information about you for health care operations. Examples include specialty referrals, medical releases, confirmation phone calls, appointment reminder cards, administrative activities, sending cast restorations (crowns/caps/veneers/fixed and removable bridges) to the lab for fabrication, continuing education, calling in a prescription to the pharmacy.

**Business Associates:** There are some services provided in our organization through contracts with business associates. Examples of business associates include management consultants, software and hi-tech computer trainers, insurance company auditors, billing and collections services. We may disclose your health information to our business associates so that they can perform the job we've asked them to do. To protect your health information, we require our business associates to sign a contract or written agreement stating that they will appropriately safeguard your health information.

**Appointment Reminders:** We may use and disclose health information to contact you as a reminder that you have an appointment for treatment or dental care with our office by post card or telephone call.

## **Special Situations That Do Not Require Your Authorization**

California and federal law permits the following disclosures of your health information without any verbal or written permission from you:

**Continuing Education and Study Groups:** We may disclose health information, study models of your teeth, copies of your x-rays, photos of your teeth and smile for case studies with a local dentist study group. Your name will be removed, but your age, ethnicity, gender, and oral health conditions may be disclosed for the case study. The purpose is for continuing education and promotion or bettering dental health care.

**Military and Veterans:** If you are a member of the armed forces, we may release health information about you as required by military command authorities.

**Worker's Compensation:** We may release health information about you for worker's compensation or similar programs if you have a work-related injury. These programs provide benefits to you for your work-related injuries.

**Your Health or Safety:** To prevent a serious threat to your health and safety, the health and safety of another person, or the public; we may use and disclose health information about you.

**Dental Oversight Activities:** We may disclose health information to a health oversight agency for activities authorized by law. These oversight activities include audits, investigations, inspections and licensure. These activities are necessary for the government and insurance companies to monitor the dental care system, programs and compliance with civil rights laws.

**Public Health Activities:** We may disclose health information about you for public health activities. These may include the following:

- a) To report reactions to medications, problems with products or other adverse events
- b) To notify people of recalls of products they may be using.

**Lawsuits and Disputes:** If you are involved in a lawsuit or a dispute, we may disclose health information about you in response to a court or administrative order. We may disclose health information about you in response to a subpoena, discovery request or other lawful process by someone else involved in the dispute.

**Law Enforcement:** We may disclose health information if asked to do so by law enforcement officials for:

- a) Response to a court order, subpoena, warrant, summons or similar process.
- b) Provide information about criminal conduct at our facility.
- c) In emergency circumstances, to report a crime, the location of the crime or victims, or the identity, description or location of the person that committed the crime.

**Coroners, Medical Examiners:** We may disclose health information to a coroner or medical examiner to aide in identifying a deceased person.

**Inmate:** If you are an inmate of a correctional institution or under custody of a law enforcement official, we may disclose health information about you to the correctional institution or the law enforcement official. This is necessary for the correctional institution to provide you with health care, to protect your health and safety, and to protect the safety and security of the correctional institution.

**Legal Requirements:** We will disclose health information about you without your permission when required to do so by federal or California law.

**With Your Verbal Agreement:** We may disclose health information about you to a family member or friend who is involved in your dental care.

#### **Situations Requiring Your Written Authorization**

If there are reasons we need to use your information that have not been described in the sections above, we will obtain your written permission. This permission is described as a written "authorization". If you authorize us to use or disclose health information about you, you may revoke that authorization in writing at any time. If you revoke your authorization, we will no longer use or disclose health information about you for the reasons stated in your written authorization. Please understand that we are unable to take back any disclosures we have already made with your permission, and we are required to retain our records of the care we provide to you.

#### **Your Rights Regarding Health Information About You**

You have the following rights regarding health information we maintain about you. You may contact us to obtain additional information and instructions for exercising the following rights.

#### **You have the right to:**

- a) **Obtain a copy of this Notice of Privacy Practices.**
- b) **Request a restriction on certain uses and disclosures of your information.** This request must be in writing. If we agree to your request, we will comply with your request unless the information is needed to provide you with emergency treatment. However, if our system capabilities will now allow us to comply with your request, then we are not required to do so. We can only address requests for this office, Jeff Knutzen, D.D.S., your request will not extend to a doctor we refer you to.
- c) **Inspect and request a copy of your dental health record.** This request for inspection or copies must be in writing and directed to the Office Manager of Jeff Knutzen, D.D.S. A reasonable fee for copies will be charged. We may deny your request under limited circumstances. If we deny your request, you may retain a lawyer to request a copy of your dental health record.
- d) **Request an amendment to your health record if you feel the information is incorrect or incomplete.** Your request must be made in writing and it must include a reason that supports the request. We may deny your request if the information is accurate and complete as stated. **Please note:** If we accept your request for amendment, we are not required to delete any information from your health record.
- e) **Obtain an accounting of disclosures to other of your health information.** We will provide information about disclosures made for purposes other than treatment, payment, health care operations, Dental Oversight Activities, disclosures excluded by law or those you have authorized.
- f) **Request confidential communications.** You have the right to request that we communicate with you about health issues in a certain way or at a certain location. For example, you may ask that we only contact you at work or by mail. We will accommodate all requests that are reasonable based on our system capabilities. Your request must be in writing and specify the exact changes you are requesting.
- g) **Revoke your authorization.** You have the right to revoke your authorization for the use of disclosure of your health information except to the extent that action has already been taken.
- h) **Complaints regarding our health information practices.** Complaints about this notice or how we handle your health information should be made in writing and sent to the Office Manager of Jeff Knutzen, D.D.S., 6260 El Camino Real, Ste. 205, Carlsbad, CA 92009. You may also submit a formal complaint in writing to the Secretary of the United States, Department of Health and Human Service

# Dental Materials Fact Sheet

by the  
Dental Board of California  
1432 Howe Avenue  
Sacramento, Ca 95825  
[www.dbc.ca.gov](http://www.dbc.ca.gov)

**What About the Safety of Filling Materials?** Patient health and the safety of dental treatments are the primary goals of California's dental professionals and the Dental Board of California. The purpose of this fact sheet is to provide you with information concerning the risks and benefits of all the dental materials used in the restoration (filling) of teeth.

The Dental Board of California is required by law\* to make this dental materials fact sheet available to every licensed dentist in the state of California. Your dentist, in turn, must provide this fact sheet to every new patient and all patients of record only once before beginning any dental filling procedure.

As the patient or parent/guardian, you are strongly encouraged to discuss with your dentist the facts presented concerning the filling materials being considered for your particular treatment.

\**Business and Professions Code 1648.10-1648.20*

**Allergic Reactions to Dental Materials:** Components in dental fillings may have side effects or cause allergic reactions, just like other materials we may come in contact with in our daily lives. The risks of such reactions are very low for all types of filling materials. Such reactions can be caused by specific components of the filling materials such as mercury, nickel, chromium, and/or beryllium alloys. Usually, an allergy will reveal itself as a skin rash and is easily reversed when the individual is not in contact with the material.

There are no documented cases of allergic reactions to composite resin, glass ionomer, resin ionomer, or porcelain. However, there have been rare allergic responses reported with dental amalgam (silver fillings), porcelain fused to metal, gold alloys, and nickel or cobalt-chrome alloys.

If you suffer from allergies, discuss these potential problems with your dentist before a filling material is chosen.

## Toxicity of Dental Materials

**Dental Amalgam (Silver):** Mercury in its elemental form is on the State of California's Proposition 65 list of chemicals known to the state to cause reproductive toxicity. Mercury may harm the developing brain of a child or fetus.

Dental amalgam (silver) is created by mixing elemental mercury (43-54%) and an alloy powder (46-57%) composed mainly of silver, tin, and copper. This has caused discussion about the risks of mercury in dental amalgam (silver). Such mercury is emitted in minute amounts as vapor. Some concerns have been raised regarding possible toxicity. Scientific research continues on the safety of dental amalgam. According to the Centers of Disease Control and Prevention, there is scant evidence that the health of the vast majority of people with amalgam is compromised.

The Food and Drug Administration (FDA) and other public health organizations have investigated the safety of amalgam used in dental fillings. The conclusion: no valid scientific evidence has shown that amalgams cause harm to patients with dental restorations, except in rare cases of allergy. The World Health Organization reached a similar conclusion stating, "Amalgam restorations are safe and cost effective".

A diversity of opinions exists regarding the safety of dental amalgams. Questions have been raised about its safety in pregnant women, children, and diabetics. However, scientific evidence and research literature in peer-reviewed scientific journals suggest that otherwise healthy women, children, and diabetics are not at an increased risk from dental amalgams in their mouths. The FDA places no restrictions on the use of dental amalgam.

**Composite Resin:** Some Composite Resins include Crystalline Silica, which is on the State of California's Proposition 65 list of chemicals known to the state of cause cancer.

**It is always a good idea to discuss any dental treatment thoroughly with your dentist.**

## Dental Materials- Advantages & Disadvantages

**DENTAL AMALGAM (SILVER) FILLINGS:** Dental amalgam is a self-hardening mixture of silver-tin-copper alloy powder and liquid mercury and is sometimes referred to as silver fillings because of its color. It is often used as a filling material and replacement for broken teeth.

### Advantages

- \*Durable; long lasting
- \*Wears well; holds up well to the forces of biting
- \*Relatively inexpensive
- \*Generally completed in one visit
- \*Self-sealing; minimal-to-no shrinkage and resists leakage
- \*Resistance to further decay is high, but can be difficult to find in early stages
- \*Frequency of repair and replacement is low

### Disadvantages

- \*Refer to "What About the Safety of Filling Materials"
- \*Gray colored, not tooth colored
- \*May darken as it corrodes; may stain teeth over time
- \*Requires removal of some healthy tooth
- \*In larger amalgam fillings, the remaining tooth may weaken and fracture
- \*Because metal can conduct hot and cold temperatures, there may be a temporary sensitivity to hot and cold
- \*Contact with other metals may cause occasional, minute electrical flow

The durability of any dental restoration is influenced not only by the material it is made from but also by the dentist's technique when placing the restoration. Other factors include the supporting materials used in the procedure and the patient's cooperation during the procedure. The length of time a restoration will last is dependent upon your dental hygiene, home care, and diet and chewing habits.

**COMPOSITE RESIN FILLINGS:** Composite fillings are a mixture of powdered glass and plastic resin, sometimes referred to as white, plastic, or tooth-colored fillings. It is used for fillings, inlays, veneers, partial and complete crowns, or to repair portions of broken teeth.

#### Advantages

- \*Strong and durable
- \*Tooth colored
- \*Single visit for fillings
- \*Resists breaking
- \*Maximum amount of tooth preserved
- \*Small risk of leakage if bonded only to enamel
- \*Does not corrode
- \*Generally holds up well to the forces of biting depending on product used
- \*Resistance to further decay is moderate and easy to find
- \*Frequency of repair or replacement is low to moderate

#### Disadvantages

- \*Refer to "What About the Safety of Filling Materials"
- \*Moderate occurrence of tooth sensitivity; sensitive to dentist's method of application
- \*Costs more than dental amalgam
- \*Material shrinks when hardened and could lead to further decay and/or temperature sensitivity
- \*Requires more than one visit for inlays, veneers, and crowns
- \*May wear faster than dental enamel
- \*May leak over time when bonded beneath the layer of enamel

**GLASS IONOMER CEMENT:** Glass ionomer cement is a self hardening mixture of glass and organic acid. It is tooth-colored and varies in translucency. Glass ionomer is usually used for small fillings, cementing metal and porcelain/metal crowns, liners, and temporary restorations.

#### Advantages

- \*Reasonable good esthetics
- \*May provide some help against decay because it releases fluoride
- \*Minimal amount of tooth needs to be removed and it bonds well to both the enamel and the dentin beneath the enamel
- \*Material has low incidence of producing tooth sensitivity
- \*Usually completed in one dental visit

#### Disadvantages

- \*Cost is very similar to composite resin (which costs more than amalgam)
- \*Limited use because it is not recommended for biting surfaces in permanent teeth
- \*As it ages, this material may become rough and could increase the accumulation of plaque and chance of periodontal disease
- \*Does not wear well; tends to crack over time and can be dislodged

**RESIN-IONOMER CEMENT:** Resin ionomer cement is a mixture of glass and resin polymer and organic acid that hardens with exposure to a blue light used in the dental office. It is tooth colored but more translucent than glass ionomer cement. It is most often used for small fillings, cementing metal and porcelain metal crowns and liners.

#### Advantages

- \*Very good esthetics
- \*May provide some help against decay because it releases fluoride
- \*Minimal amount of tooth needs to be removed and it bonds well to both the enamel and the dentin beneath the enamel
- \*Good for non-biting surfaces
- \*May be used for short-term primary teeth restorations
- \*May hold up better than glass ionomer but not as well as composite
- \*Good resistance to leakage
- \*Material has low incidence of producing tooth sensitivity
- \*Usually completed in one dental visit

#### Disadvantages

- \*Cost is very similar to composite resin (which costs more than amalgam)
- \*Limited use because it is not recommended to restore the biting surfaces of adults
- \*Wears faster than composite and amalgam

**PORCELAIN (CERAMIC):** Porcelain is a glass-like material formed into fillings or crowns using models of the prepared teeth. The material is tooth-colored and is used in inlays, veneers, crowns and fixed bridges.

#### Advantages

- \*Very little tooth needs to be removed for use as a veneer; more tooth needs to be removed for a crown because its strength is related to its bulk (size)
- \*Good resistance to further decay if the restoration fits well
- \*Is resistant to surface wear but can cause some wear on opposing teeth
- \*Resists leakage because it can be shaped for a very accurate fit
- \*The material does not cause tooth sensitivity

#### Disadvantages

- \*Material is brittle and can break under biting forces
- \*May not be recommended for molar teeth
- \*Higher cost because it requires at least two office visits and laboratory services

**NICKEL OR COBALT-CHROME ALLOYS:** Nickel or cobalt-chrome alloys are mixtures of nickel and chromium. They are a dark silver metal color and are used for crowns and fixed bridges and most partial denture frameworks.

#### Advantages

- \*Good resistance to further decay if the restoration fits well
- \*Excellent durability; does not fracture under stress
- \*Does not corrode in the mouth
- \*Minimal amount of tooth needs to be removed
- \*Resists leakage because it can be shaped for a very accurate fit

#### Disadvantages

- \*Is not tooth colored; alloy is a dark silver metal color
- \*Conducts heat and cold; may irritate sensitive teeth
- \*Can be abrasive to opposing teeth
- \*High cost; requires at least two office visits and laboratory services
- \*Slightly higher wear to opposing teeth