THREE IMPORTANT POLICIES

A policy is a written statement that determines actions or activities of an organization. We have three important policies that we feel important to share with you and your child, our patient.

We have put them in writing because we live by them and ask that all our patients live by them as well. We realize that the institution of these three policies may be different from what you may be accustomed to in the past; however, we believe that they are necessary. We ask you to read this page and agree to comply with them.

COMMITMENT TO THE APPOINTMENT POLICY

We **RESERVE** quality time for each patient in our practice. An appointment in our schedule with your child's name on it is a bond of trust that we will be here to serve you and you will be present for that reserved time. Our policy in this regard is extremely firm. We realize the value of your time and ask that you respect our time**.** We understand that certain situations may arise that may prevent your child from being able to make his/her dental appointment. **If you find that your child is not going to be able to make his/her scheduled appointment time, we ask that you please give our office 24 hours notice. If appropriate notice is not given, we reserve the right to reschedule failed appointments at our discretion. Failed appointments do not only affect your child, but they also affect others who are waiting to see the dentist.**

There are certain procedures that will be scheduled at specific times in order to provide your child with the best possible care. **If it should happen that you arrive late for your reserved appointment, please understand that we may not be able to see your child on that day.** Due to the limited availability of our appointment times, a fee may be charged for broken appointments. Appointment reminders may be sent via text and/or phone.

COMMITMENT TO TREATMENT POLICY

We believe that all treatment started should be completed. Incomplete treatment leads to problems, complications, and misunderstandings. Incomplete treatment leads to the loss of teeth and further disease. Some treatment plans, because of their design, take several appointments to complete. Therefore, this policy states that all agreed upon treatment plans, once they are started, should be completed.

COMMITMENT TO FINANCIAL AGREEMENT

We believe that we have a responsibility to use our best professional care, skill, and judgment in planning for you child's dental treatment. Our office operates on a fee-for-service basis. For patients without dental insurance, we accept MasterCard, Visa, Discover, and CareCredit as well as cash and checks. Any insurance program is solely between you and the carrier of your insurance. We are happy to assist you in filing primary insurance. However, the responsibility of payment for our services is yours. By signing below, you have indicated that you agree that all fees have been properly explained to you and you agree to fulfill your financial commitment to our office promptly and completely. Please understand that the treatment plans that are presented to you are only an **estimate**. Payment by your insurance company is not guaranteed until the claim is received and processed. No practice can fulfill its mission to its patients when a bond of trust is violated by failure to pay for services.

We appreciate your cooperation with these scheduling procedures.

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Parent Date Staff Member Date