

SpeaksOrthodontics

Smile Big...Smile Often!

APPOINTMENT AND OFFICE GUIDELINES

Patient's Name: _____

We realize that all of our orthodontic patients have many important obligations, whether they are to work or to school. We value your time both as parents and as patients. As you can imagine, a well organized schedule requires considerable structure tempered with flexibility. Since our younger patients are of school age, it is unavoidable that some school will be missed, although we make every effort to keep this to a minimum. Many offices mandate a strict schedule of alternating between morning and afternoon appointments for their patients. With your cooperation, we hope to never need to implement such a rule. It would be impossible to offer all appointments after work or school. Doing so would necessitate daily office hours from 3-11PM! We specifically schedule long appointments during school hours and shorter appointments after school. By doing this, we do not reserve an entire afternoon for three or four patients, but rather accommodate as many families as possible with afternoon appointments. Absence excuses can be provided when needed by the patient's school or employer.

Arrival time: Because our schedule is carefully designed to minimize the time you need to spend in our office, early or late arrivals for appointments can pose a problem. In fairness to other patients, we see patients according to appointment time, not arrival time. We will see late patients if our schedule permits, but we prefer not to "squeeze in" late arrivals, as this forces every subsequent patient to be seen late and is unfair to patients who arrive promptly. Late arrivals may need to be rescheduled to another day if a later opening in the schedule is not available.

Missed appointments: We extend to our patients the courtesy of being available at the appointed time or rescheduling well in advance when occasionally necessary. We respectfully request that you extend us the same courtesy. If you are unable to keep your scheduled appointment, please let us know at least 24 hours in advance so we may reschedule you appropriately and offer that time to another patient. If we need to reschedule an after school appointment, it may need to be scheduled during school hours to avoid any adverse delay in the patient's treatment progress. It is not a good idea to delay the scheduled treatment excessively in order to obtain an after school appointment.

Appliance damage: If you are aware of a loose bracket or other damage to your appliances, please call prior to the next appointment. This will allow us to adjust the time for your appointment or reschedule to repair the damaged appliance. It may not be possible to repair appliances at your regular visit, especially in the busy afternoon hours. We try to set aside time to repair appliances in the morning from 9AM to 11AM. If you arrive at your regularly scheduled appointment with damaged appliances, we may only be able to make you comfortable and reschedule for the repair. Too many damaged appliances will delay treatment. A charge may be necessary for excessive appliance damage. After 3 loose/broken bands or brackets, a charge of \$35.00 per bracket may be assessed.

Emergencies: Patients with pain, swelling or bleeding should call our office to determine if they need to be seen by one of our office staff. A referral may need to be made to your dentist or a specialist for treatment when trauma is present.

Cont.

Moving (transferring to another orthodontist): If the patient moves or transfers to another location/orthodontist while still undergoing active treatment, the following applies:

All original records are, and must remain, the property of Speaks Orthodontics. \$25.00 records/administration fee will be assessed for the duplication and transfer of diagnostic records (models, x-rays, photographs, etc.). Prior to the transfer, your contract will be reviewed and recalculated in accordance with amounts allocated towards appliance placement and months the patient has been in treatment. We will review this with you, as we did your initial contract, so that you may be clear regarding the amount due to our office up to the time of transfer. Adjustments will then be made concerning possible overpayment (credit) or underpayment (balance still due) on the account.

New financial arrangements, which may vary from ours, and are completely exclusive of ours, will need to be made by you and your new orthodontist.

Patient's name: _____

Responsible Party Signature: _____

Date: _____