

TO OUR PATIENTS

Thank you for choosing us to provide your dental care. We will do our best to continue to earn your confidence. We are dedicated to providing you with the most comfortable and technically up-to-date dental care and take continuing education to stay abreast of current advances in treatment.

When you have an appointment with us we will do our best to see you promptly. We feel that your time is just as important as ours and we hope you will feel the same. Arriving late is sometimes unavoidable but can cause a problem for other scheduled patients. In some instances the patient may be asked to reschedule. If you need to change an appointment, we require at least 24 hours notice, (a Monday appointment would have to be changed by Friday). A broken appointment will be charged at the rate of \$25.00 per hour. Should a patient continue to break appointments, we reserve the right to dismiss that patient from our practice.

PLEASE SIGN BELOW – I have read and understand the above policy.

X _____

Date: _____