Adroit Family Dental

5493 Amy Street

West Linn, OR 97068

Ph. 503.710.9839

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| **FINANCIAL POLICY** |
| All fees including co-payments are due at the time of service. Payment options are the following: personal checks, money order, cash, and Visa / MasterCard. Our office does not offer in house financing, however we do offer financing through an outside finance company.Our office will bill your insurance company as a courtesy to you. We will provide you with an insurance estimate prior to any treatment. This is just an estimate and the amount the insurance company pays may be different than what we have estimated. If for any reason your insurance does not pay the estimated amount than you the patient or the parent / guardian (if minor) become responsible for the balance of the amount.From time to time treatment may differ from the proposed treatment plan that you were given during the examination appointment. You will be informed of any of these unforeseen changes.I give my permission to Adroit Family Dental to contact my employers Human Resource department to receive any needed benefit information for myself and family members that have coverage under the same insurance policy. |

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| **PATIENT RESPONSIBILITY AGREEMENT** |
| As a dental patient receiving care at Adroit Family Dental, you are responsible for coming to your dental appointment on time.**CANCELLATION:** If you cannot come to a scheduled dental appointment, please call the office at least two business days prior to the appointment. This allows us to fill the time with another patient. A $50.00 charge may be applied to your account if at least two business days is not given. Penalty fees have to be paid before new appointments can be made.**SATURDAY and SUNDAY APPOINTMENTS:** We are available for dental services for your convenience on Sunday and Sunday by appointment only. We require $200 dollars credit-card pre authorization to prevent NO-SHOWs and less than two business day’s cancellation notice. Please help us avoid $200-dollar charge by keeping your dental appointment. **LATE ARRIVALS:** Please be on time for your appointment. If you are more than 15 minutes late we may have to reschedule your appointment.**CHILDREN UNDER 18 YEARS OF AGE:** A parent or legal guardian must come with children for their appointments. We prefer for patients under the age of 18 to have a parent or guardian present during appointment.**UNATTENDED CHILDREN:** We ask that children not be in the operatory during treatment of their parents, guardians, or other family members except in cases where the doctor deems it necessary. This is for the safety of the child. If children are disruptive in the waiting area, we will ask that the parent, guardian or family members to reschedule their appointment for another time when proper supervision can be provided. |

I have read and understand the financial policy & patient responsibility agreement for Adroit Family Dental.

Patient’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Patient’s or Patient/Guardian’s Signature: Date: