

Style Your Smile Family & Cosmetic Dentistry, LLC

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Welcome to our dental office! We are happy to have you as our patient and look forward to offering you and your family the finest dental care available. The focus of our practice is health-centered, preventative dentistry. We enjoy helping people actively participate in their own health care and control the causes of dental disease. Furthermore, we emphasize aesthetic, adult restorative treatment designed for long-term beauty, comfort, function and low maintenance. If there is anything we can ever do to improve your experiences with us, please don't hesitate to let us know.

We have three important commitments in our practice. We believe they are necessary in building the trust it takes for us to successfully work together. Please read and initial, as acknowledgement, as indicated.

Commitment to Treatment-our team will deliver the best dental care we are capable of delivering to you. We also ask that you care for your dental health to the best of your ability. Good daily home care is essential for dental health; additionally, starting but not finishing treatment can lead to more advanced, future care needed, adding to your costs and limiting the success of treatment.

The first step towards complete oral health is through examination and diagnosis. In order to accomplish this, we will take a full set of x-rays (FMS) during your first, new patient exam.

- We ask that you be aware of your insurance program/service history to determine whether your insurance will cover the cost at your first appointment. If not covered, we will require payment on the date of service. Please initial.

Commitment to Appointment-we will reserve time especially for you in our schedule, and will rarely keep you waiting.

When a patient does not show up for a scheduled appointment, we are unable to fill this appointment with another patient who needs dental care. This is our attempt to ensure that you and our other patients receive the dental care needed.

- Broken appointments-Patients are allowed two broken appointments in a 12-month period. This includes no call/no shows, and/or late cancellations. If you need to cancel, please call us at least 24 hours before your scheduled appointment. Please initial.
- If for any reason, you miss a scheduled appointment or cancel late twice within a 12-month period, you will not be scheduled another appointment. The office reserves the right to charge you \$25 for a missed, scheduled appointment and also to dismiss you as a patient and no longer provide services to you. Please initial.
- If you continually/consistently reschedule appointments, even if it is within the required 24-hour time period, the office reserves the right to dismiss you as a patient and to no longer provide services to you. Due to this behavior, we are unable to fill the appointment time with another patient who needs dental care. Please initial.

Commitment to Financial Considerations-as a team, we commit to give you upfront information on finances including costs and when payments are due, and also any insurance estimates. We ask that you provide payment in a timely manner. Please initial.

Thank you, and we look forward to a continued, successful relationship with you and your family.

Dr. Sudha Alexander and Team

Patient or Parent/Guardian Signature

Date