

WELCOME!!

Thank you for allowing us to serve you. We hope the following information will make your experience a pleasant one. We care about your comfort, health and happiness. Dr. Carlson is one of the leading cosmetic and holistic dentists and will provide you with the finest care. Also, her staff is here to make you feel comfortable. Feel free to ask for a blanket or pillow, coffee, tea, water or hot neck wrap, - we are here to make you feel relaxed and provide the best possible service anywhere in the world!

INSURANCE PATIENTS

As a courtesy to you, we will process your insurance claim at the time services are rendered. If there are any complications with the insurance company, we will provide a copy of your claim and any information they need to the patient. For example, if we have sent the insurance claim to the information the patient has provided us, and the insurance company is claiming that they haven't received it, or the member isn't listed, then patient will need to contact the insurance company and resolve the matter.

Please understand that even if your insurance says they pay 100%, they usually pay less. They only pay 100%, 80, or 50% of THE INSURANCE COMPANYS FEES. We will have the insurance reimburse you directly. In order to file, we will need ALL the information that is asked on the green registration form.

Thank you again for the opportunity to be of service to you, your family, associates and friends. We welcome you and them ☺

FINANCIAL AGREEMENT

1. I agree to be responsible for payment for all dental services I myself, or my dependants receive at Dr. Carlson's office. I understand that payment is due for treatment the day of service.
2. When patients arrive late it puts us behind for the next patient. Please plan your travel time to ensure you arrive a few minutes before your appointment. If you are running late, please call to let us know. If you're coming for your cleaning appointment, the Hygienist will do what she can in the time you are here. Your appointment will still end at the scheduled time. Please do not arrive later than 15 minutes after the appointment time or we may not be able to accommodate you. Please understand that it is costly when a patient cancels on short notice. We have patients waiting for appointments so anything less than 72 hours is not sufficient time for them to re-arrange their schedules to come in to replace your appointment.

Signature _____

Date _____