

NORTHAMPTON DENTAL GROUP, P.C.

ROBERT D. BOYNTON, JR., D.D.S. ALAINA ELRINGTON KELLY, D.D.S.

WELCOME TO OUR OFFICE

To help us fulfill the confidence you have shown in us, we ask you to read and sign this statement of our office policy to help provide you with the best dentistry possible, to prevent misunderstandings and to help keep all our patients satisfied and pleased that they have chosen our office.

PREVENTION

We emphasize and practice preventive dentistry knowing that in the long run it will help save your teeth and decrease your dental costs. We recommend regular oral prophylaxis (scaling and cleaning), regular checkups, semi-annual fluoride applications until age twenty and x-rays at regular intervals. All new patients will be seen first by our hygienist for a prophylaxis and full mouth x-rays. These x-rays are necessary for us to make a diagnosis to determine your appropriate dental treatment. X-rays reveal many things not detectable by any other means such as cavities, development of abscesses, infection and early periodontal disease. It is important to your overall dental health that you complete our Medical History Questionnaire and keep us informed of any changes in your medical care and treatment including any medications.

APPOINTMENTS

As a courtesy to all of our patients with scheduled appointments, we ask that you arrive on time for your scheduled appointment, we discourage "walk ins" without scheduled appointments. If you have an emergency please call our office and we will assist you in receiving appropriate care. If it is necessary to reschedule an appointment, in order to better utilize our available appointment times, we require that you give us **48 business hour** notice.

PAYMENTS/INSURANCE

Your insurance policy is a contract between you and your insurance company. You are responsible for payment regardless of any insurance company's arbitrary determination of usual and customary rates. **Payment is due at the time of service.** We accept cash, checks, and most major credit cards. **Overdue accounts are subject to 1.5% interest charge.**

If you have any questions about our policies, please ask one of the dentists or staff. Above all we want you to be satisfied.

SIGNATURE _____