

Welcome New Patient!

Thank you for choosing our office to meet your orthodontic needs. We are committed to providing you with excellent and friendly service. We sincerely hope the time you spend here is rewarding and fun for you and your family. A **NO FEE CONSULTATION** is provided courtesy of this office.

YOUR NEW PATIENT CONSULTATION is designed to be an informative visit. We offer to take two digital orthodontic x-rays at the beginning of this visit to allow the Doctor to accurately determine the course of treatment required and to share with you the details of the prescribed treatment plan. These x-rays are used as a diagnostic tool for the Doctor's use only; they remain the sole property of the office and will not be distributed without consent of the patient or the patient's legal guardian.

As the customary consultation fee is waived, neither you nor your insurance company will be billed for the initial consultation. X-rays may be billed, if treatment commences, at records appointment. If you wish to transfer the x-rays to another office, there will be a **duplication fee** for each x-ray and a written request must be on file.

Your signature will grant us permission to use your personal information to verify your insurance benefits and submit future claims on your behalf if needed.

Signature _____
Patient/Legal Guardian

Date _____