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Insurance

Today you will be responsible for your “**estimated**” portion. We will file your insurance as a courtesy, it is your responsibility to know and understand your dental plan. Insurance companies will NEVER give a final determination on payment until the claim is processed and received. After your insurance pays, you are responsible for any UNPAID balance and if your insurance pays more than we expected, we will issue you a refund check in the mail. If your account becomes delinquent and a collection agency is required, any fees assessed will be your responsibility as well.

Notice of Privacy Practices

This notice describes how health information about you may be used and disclosed and how you can get access to this information. Listed here is a short review of the privacy practices adopted by Greater Springfield Endodontics. You may ask for a copy of the complete Privacy Practices from the front office. The privacy of your health information is important to us so please review it carefully.

We are required by applicable federal and state law to maintain the privacy of your health information. We are also required to give you this notice about our privacy practices, our legal duties, and your rights concerning your health information. We must follow the privacy practices that are described in this notice while it is in effect. This notice takes effect 07/19/2004, and will remain in effect until we replace it.

We reserve the right to change our privacy practices and the terms of this notice at any time, provided such changes are permitted by applicable law. We reserve the right to make changes in our privacy practices and the new terms of our notice effective for all health information that we maintain, including health information we created or received before we made the change. Before we make significant change in our privacy practices, we will change this notice and make the new notice available on request.

Greater Springfield Endodontics will use and disclose your health information about you for treatment, payment, and health care operations. We will not use your health information for marketing communications without your written authorization. You have the right to look at or get a copy of your health information, with limited exceptions. If you have additional questions or complaints please contact the office manager for Greater Springfield Endodontics.

ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES AND FINANCIAL RESPONSIBILITY

I, (printed name) _____, have had the opportunity to read or receive a copy of Greater Springfield Endodontics's Notice of Privacy Practices. I further agree that Greater Springfield Endodontics and their business associates may contact me, and all responsible parties on my account, on our cell phone or other mobile devices concerning any and all aspects of my account.

Signature

Date

Root Canal Therapy Consent

We are concerned not only about your dental health and root canal treatment needs, but also about your right as a patient to make the treatment decision that you feel is best for you. Our aim is a mutual sharing and understanding of information. We feel it is important to advise you of the reasonably foreseeable risks of root canal therapy. The following is important information you need to have in making your decision about treatment:

1. There are alternatives to root canal therapy. They include no treatment at all, extraction with no replacement, or extraction followed by a bridge, partial denture, or implant to fill the space created after the extraction.
2. We make special efforts to preserve the crowns of teeth we treat, but despite our best efforts, occasionally porcelain crowns may be destroyed during treatment.
3. Fractures are one of the main reasons root canals fail. Unfortunately, some cracks extend from the crown down into the root are invisible or hard to detect. Whether the fracture occurs before or after the root canal, it may require extraction (removal) of the tooth.
4. Root Canal therapy is designed to save a tooth that may otherwise require extraction (removal). Root Canal therapy has a very high success rate but it cannot be guaranteed. Even after root canal therapy, approximately 5% of treated teeth may eventually required extraction (removal).
5. We invite and welcome all of your questions regarding our work with you.

Signature

Date