

Scident Dental Clinic

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Welcome to Scident Family Dental Clinic

It is our optimal goal to provide you and your family with the highest quality of dental care, while maintaining a friendly and relaxing environment. To keep our standard of care to a level which best serves your dental needs, we ask you to please observe the following guidelines.

General

- 1) Patients should inform our office of any address and/or telephone number changes as soon possible. If our office submits any correspondence (requests, estimates, reminders) to old street or email addresses that have not been updated, the patient will be still responsible for any missed information or requests.
- 2) Dental Insurance is a private insurance and is an agreement between the insurance provider, the patient and/or the employer. Patients understand that accepting insurance payments on their behalf is a courtesy, and if our office has any difficulty in processing your claims, we will refuse to accept payment on your behalf. Our office maintains the right to refuse acceptance of any insurance provider if we are unable to receive information from them freely. If the insurance provider does not pay in full, the patient is responsible to pay any amounts outstanding. We advise that if patients use their dental insurance elsewhere, they should keep track of any financial limits that may affect future payments. If other usage is reported to our office we will enter it into our system and help you monitor it.
- 3) Any changes in your dental insurance coverage must be reported to our office as soon as possible. If your policy or plan changes, or if you have changed your coverage details, you must inform our office at least 2 business days prior to your next appointment. This will allow us to update our system and access the new insurance breakdown information from your insurance provider. If your insurance does not provide breakdowns to our office you will be responsible to provide and booklet of your coverage details. If you were unable to provide the correct insurance information in advance we may need to bill you directly and submit a claim for your reimbursement.
- 4) Dental Insurance correspondence **must be forwarded** to our office a min. of 2 days prior to dental treatment. In most instances our office will submit anticipated treatment to your insurance provider on your behalf so that you are aware of the portion they will cover for your treatment. If our office has advised that we will accept payment from your insurance provider, this correspondence must be forwarded to our office prior to the treatment or we may refuse the insurance payment and you would need to pay the amount in full and be reimbursed by your insurance. If you cancel short notice for an appointment because of insurance coverage reasons, short notice cancellation fees for the appointment will still be applied.
- 5) All payment of services is due upon the date the service is provided. If we are accepting your insurance payment on your behalf, any portions not covered by your plan are due on the date services are provided. On occasion, some insurance may not pay in full of the anticipated amount. In this instance, you will receive an email or invoice by mail to advise you of your account balance. The amount is due when email is sent. To cut down on cost our office does not send out monthly statements and you will receive only one statement if a balance is outstanding on your account. Please ensure your email and mailing address is up to date, as interest charges will be applied 15 days after the invoice is sent. For your convenience, you may pay by phone with credit card if that is more convenient.

Initials: **X** _____

- 6) All appointments are confirmed when they are booked with the exception of dental cleanings and/or combination cleaning appointments as they are booked in advance. All cleaning and hygiene appointments must be confirmed. Our office will send out reminders or call to confirm cleaning appointments 1-4 weeks in advance. We will do our best to contact you for confirmation. If you do not confirm the prebooked appointment for cleaning then it will be cancelled. Our office will try to confirm cleaning appointments with you but, if we do not receive a response within the specified time, your appointment will be cancelled and you will need to contact us to rebook it. This will help avoid missed appointment fees for patients that are out of town or away for any reason. **Please note the 48 business hours notice required to cancel an appointment has no relation to the confirmation of cleaning appointments.*
- 7) Appointments booked with a patient are the responsibility of the patient. A parent or guardian must inform our office if a child is not authorized to book their own appointment, as the parent or guardian will be charged for any missed or short notice cancellation fee. Our schedule may vary from time to time and we may run late if we are attending an emergency or a treatment of another patient requires immediate attention. We ask for your patience and understanding as our office in turn will assist you also if you were to have an emergency in the future that would cause other patients a delay in their appointment time.
- 8) Patients are responsible to attend their appointments for the treatment and length of time that has been reserved with them, unless there has been a change in the treatment plan by the dentist or another treatment plan has been accessed as being more urgent by the dentist.
- 9) Patients are asked to return any call we make, emails we send to confirm appointments or otherwise. This will maintain open communication with our office to avoid confusion regarding your appointments, treatment plans and insurance matters.
- 10) Patients are requested to turn off their mobile phone or set it to vibration as a courtesy to other patients and staff in the office. This will prevent disturbance of the treatment areas.
- 11) Please do not enter the clinical areas of the office without permission, unless using the bathroom facilities. Treatment is in progress throughout the day and we would like to maintain an efficient and productive clinic with minimal interruptions.
- 12) Our office has a strict policy and has **zero tolerance** for abusive language or aggressive behavior. Please respect our doctors and staff. If any aggressive behavior, verbal abuse is used, our office maintains the right to dismiss our patient relationship with you. If you are having a conflict that you require assistance with please speak to the office manager or Dr. Chehroudi. We will do our best to resolve the issue in a constructive manner. Our staff is trained to maintain professionalism and respect at all times and we request the same from our patients.

Office Hours

Our office requires 2 full working days notice for any changes or cancellations to appointments to avoid a charge. Minimum charge of \$50.00 for 1 hour appointment. Fees double for Saturday appointments.

Monday to Wednesday:	9:00am - 5:00pm
Thursday (reception only)	10:00am - 2:00pm
Saturdays	9:00am - 5:00pm <i>CLOSED LONGWEEKENDS</i>
Fridays/Sundays	-CLOSED-

Initials: **X** _____

Cancelation Policy

There are many times our patients require urgent or emergency treatment and therefore require an appointment as soon as possible. When patients give the clinic an advanced notice of their need to cancel a scheduled appointment, this time can in turn be allocated to those patients in need of urgent dental care. The advance notice allows our office the time required to contact patients that need the appointment time and give the patient also the time to respond and make arrangements to take the appointment time that has come available.

We ask that patients do their best to arrive on time for their dental appointments. If you are running slightly late please contact our office to advise us of your delay. We will do our best to accommodate patients up to a 15 minute delay and sometimes later depending on how our schedule is for the day. If you are too late to have your appointment you may be charged for the missed appointment if there was not extenuating circumstance preventing you to arrive within a acceptable time frame.

Bearing these special needs in mind, the clinic requires a minimum of 48 business hours notice for any changes or cancellations of appointments to avoid a charge. If less than 48 business hours is provided for a cancellation or no notice is given and the patient does not show up for their scheduled appointment a min fee of \$ 50.00 per hour will be charged and will be assessed according to the length of appointment and day it was booked for. (**Some exceptions may be made for serious illness or tragedy*).

In the event that a patient does not "show up" on a second occasion, or has been considerably late for appointments the practice policy is to ask the patient to find another dental practice of their choice, at which point our administrative staff will be happy to transfer the patients records to a new the new office with a letter explaining why the transfer is being made. Please note that insurance companies do not cover the fees for broken appointments or the copying of patient files, therefore payment is the patient's responsibility.

Payment Policy

Unless prior arrangements have been made, payment is due upon completion of treatment on the date of service. Please note that all required services may not be covered by your insurance carrier and every insurance plan has its own policies, procedures and exceptions. It is the patients's responsibility to cover the cost of the procedures that are not covered by their insurance plan.

At Scident, we look forward to taking care of your oral health needs and welcome you and your family to our team of dental professionals.

I have read the above policies of the Scident Clinic and understand my responsibilities as a patient.

SIGNATURE OF PATIENT: **X** _____ DATE: **X** _____