

## We strive for excellence in every aspect of your dental care.

## **Appointment Guidelines:**

Thank you for choosing Smile Chicago to help you with your dental needs.

One way to help make the most of your time is by being prompt to your appointment. We understand emergencies arise, however if you are more than 15 minutes late for your appointment, we will reschedule your time for a different day. As a courtesy to us and other scheduled patients, please allow proper notice of at least **two (2) full business days** if your appointed time needs to be changed. Three people lose out when you cancel your appointment last minute or choose to not show; you, your provider of care and the person who could have used your time.

Our office is closed on Fridays. If you are scheduled for Monday and need to make an adjustment, please do so the Wednesday prior. Without proper **notice we reserve the right to charge a cancellation fee.** 

We respect your appointed time and assure you we will make every effort to stay on time. Please understand if we are delayed it usually is due to a dental emergency.

If you have a dental emergency we will see you on the same day you call.

## **Financial guidelines:**

We accept Cash, Checks, Visa, MasterCard, Discover, American Express and Care Credit (an independent financing company).

Services are required to be paid in full on date when treatment is rendered.

<u>Insurance</u>: Please note your dental health benefits contract is an agreement between you and your carrier. As a courtesy to all of our patients we will do all we can so that you are able to maximize your dental insurance benefits and file claims on your behalf.

Please feel free to share thoughts or concerns you may have.

By signing this document I acknowledge that I have read and understand the above:	
Patient Signature:	Date: