

## WELCOME TO OUR PRACTICE!

Thank you for choosing Seaway Family Dental for your oral healthcare and smile enhancement needs. Dr. Limantzakis, his associates and the team appreciate the opportunity to deliver outstanding service for you, your family and friends.

### **Your Complete Exam and Preventative Care Visit**

We will reserve 1 ½ hours for your first visit so that we have plenty of time to get to know you. After reviewing your medical history and patient intake form , we'll discuss your goals and expectations and the reason for your visit. You'll meet Dr. Limantzakis or one of our caring associate doctors, who will perform a comprehensive exam of your teeth and gums and check for signs of decay and periodontal disease. They will also examine your existing dental work for wear or fractures. An oral cancer screening is a standard part of every new patient exam. Future procedures performed in our office are based upon this initial examination. This examination allows us to identify specific problems and develop a customized treatment plan for you. The results of the examination will be discussed with you at the end of the visit, along with possible recommendations and estimated fees. To help you become an informed patient in your dental care sometimes photographs may be taken of your teeth with a camera and displayed on a chairside monitor. We use these images to communicate the findings and suggested treatment options. A thorough cleaning will also be done. In some instances, we may request that the patient returns to target some areas of concern.

### **Prior To Your First Visit**

Our Patient Intake forms, which include a comprehensive Medical History section, are available online in both English and French. Please print and fill out this form regarding your medical and dental history prior to coming into the office. Children under the age of eighteen must be accompanied by a parent or guardian on their first visit.

If you have models/radiographs from a previous dental office that are less than two years old, we would appreciate you contacting that office and bringing them with you, or we can request a transfer of records from the previous office. This will make your comprehensive exam easier and more efficient.

If there is any specific condition of concern in your past medical history, please contact our office before your first appointment. Patients with certain medical conditions might require pre-medication with antibiotics to prevent bacterial endocarditis. These may include heart valve replacement, mitral valve prolapse, knee or hip replacement surgery. Also, please notify our receptionist if you wear partial or complete dentures.

### **Your Reserved Appointment**

Seaway Family Dental's goal is to provide our patients with quality dental care in a prompt and efficient manner. When an appointment has been scheduled, that time has been reserved only for you. When an appointment is missed, that time cannot be used to treat another patient. Therefore, we politely ask that our patients be prompt in being present at the time of their reserved appointment. As a courtesy to our patients, and based on your preferred method of communication (e-mail, text or telephone) we will be contacting you to confirm 2-3 days before your reserved appointment.

### **Insurance Information**

We must emphasize that as your dental care provider, our relationship is with you, our patient, not with your insurance company. Your insurance policy is a contract between you and your insurance company. As a courtesy to you, once you provide the office with your insurance information we will electronically process your insurance claim for you. However, you are responsible for your account. Most insurance companies will mail your reimbursement cheque to you within 5-7 days or 48 hours if you have direct deposit.

We are pleased that you may have insurance to help pay for necessary treatment and we are happy to work with you to answer any questions that you may have regarding your policy. We will also provide a pre-determination or estimate for your treatment that we will gladly submit electronically to your insurance company in order that you may know what is covered and what is your responsibility. However, we want you to know that our treatment plan is based on careful diagnosis and evaluation of your particular needs and is in no way influenced by what your insurance may or may not cover.

If your necessary treatment is not covered for whatever reason, we will work with you to find an alternate course of action. We do offer various payment options that we will discuss with you at that point should it become necessary.

### **Payment Options**

For your convenience, we accept Visa, MasterCard, Debit and Cash. Outside financing is also available through **DentalCard Financing** upon request and approval. We will gladly assist you in this application process as well.

It is a pleasure serving you, our patient, and we hope you enjoy your visit to our office. Please let us know if there is any way we can make your visit more comfortable.