

Clemons Cosmetic & Family Dentistry Dental Care Warranty Policy

Treatment	Clemons Cosmetic & Family Dentistry's Obligations	Patient's Responsibility
Dental Implants	Clemons Cosmetic & Family Dentistry will replace or repair the same material type of titanium implant fixtures and/or prosthetics at no cost during 12 Months after placement. The warranty will not apply if an occlusal guard was recommended and not obtained and used.*	The patient must keep the prescribed regular checkup appointments (every 6 months) for routine professional exam, X-rays and Cleaning at Clemons Cosmetic & Family Dentistry. Any defective prosthesis must be given to or retrieved by the dentist.
Crowns, Bridges, Porcelain, Veneers	Clemons Cosmetic & Family Dentistry will replace or repair the same material type at no cost during these 12 Months after placement. The warranty will not apply if an occlusal guard was recommended and not obtained and used.* The warranty will run concurrently with products produced by outside lab.	The patient must keep the prescribed regular checkup appointments (every 6 months) for routine professional exam, X-rays and Cleaning at Clemons Cosmetic & Family Dentistry. Any defective prosthesis must be given to or retrieved by the dentist.
Denture and Partial Denture	Clemons Cosmetic & Family Dentistry will repair dentures and partials for a period of 12 Months after the delivery date. The warranty will not apply to any accidents, including dropping your denture or partial.*	The patient must keep the prescribed regular checkup appointments (every 6 months) for routine professional exam, X-rays and Cleaning at Clemons Cosmetic & Family Dentistry. Any defective prosthesis must be given to or retrieved by the dentist.
Fillings	Clemons Cosmetic & Family Dentistry will replace or repair fillings at no cost for a period of 12 Months from the placement date. The warranty will not apply if tooth has recurrent decay or if an occlusal guard was recommended and not obtained or used.*	The patient must keep the prescribed regular checkup appointments (every 6 months) for routine professional exam, X-rays and Cleaning at Clemons Cosmetic & Family Dentistry.

Disclaimers:

The warranty is inapplicable if our office's instructions and patient's responsibility are not followed.

The warranty is inapplicable if oral hygiene is neglected.

The warranty is inapplicable if a patient fails to present for examinations every six months.

The warranty cannot be applied to temporary restorations.

The warranty is inapplicable if a patient has gum or periodontal disease for which patient has not received the gum treatment needed.

The warranty is inapplicable if an illness is present, which has an unfavorable effect on the mouth.

The warranty cannot be applied when injury caused by accidents, sports, or any third party occurs.

The warranty is inapplicable if the prosthesis is not used properly.

The warranty cannot be applied to teeth where root canal treatment was needed after placement.

The warranty cannot be applied to areas of naturally declining gum tissue, tooth or bone.

Refund is not part of warranty policy.

We do not reimburse any expenses incurred from dental treatment received from another office inclusive of travel and lodging

The warranty does not cover dental work performed by another office. We do not take responsibility for prior or continual dental work done by another dental office.

The warranty does not cover damage of dental work caused by or related to other dentist's work.

***Please ask the office about additional 5 Year Dental Warranty, for a selection of services, offered by an independent third party**

CLEMONS COSMETIC & FAMILY DENTISTRY

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Clemons Cosmetic & Family Dentistry
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Appointment Policy and Guide to Patient Care

We take great pride in the quality of care that we deliver. In effort to maintain this high-level of care, we have instituted appointment guidelines regarding cancellations/no-show/lateness. Compliance with this policy will allow patients to receive treatment in a timely and efficient manner, promoting optimal care and oral health.

1. Once appointments are scheduled, patients are expected to attend each and every session at the appointed time.
2. If you are more than 15minutes late for scheduled appointment, you may receive a broken appointment fee.
3. All cancellations must be communicated to the department 48 'working' hours in advance of your appointment.
4. If you cancel without the aforementioned notice or fail to show for two (2) consecutive visits, you may be

discharged from being provided care at our practice.

5. Our broken/no-show appointment fee is \$75.00 and is subject to change without notice.

6. Clemons Cosmetic & Family Dentistry reserves the right not to reschedule patients who have been discharged for failing to show for scheduled appointments. We appreciate your understanding and cooperation with this policy.

I have read, understand, and agree to abide by the aforementioned policy.

I acknowledge that I was provided with a copy of the Clemons Cosmetic & Family Dentistry Guide to Services.

HIPAA Notice of Privacy Practices

Privacy of Protected Health Information

Federal and state laws require us to maintain the privacy of your health information and to give you this Notice about our privacy practices, our legal duties, and your rights concerning your Protected Health Information (PHI). This Notice took effect April 14, 2003. We reserve the right to change our privacy practices and the terms of this Notice at any time, law permitting. **You may request a copy of our notice at any time or visit our website at www.smilesbyclemons.com**

Uses and Disclosures of Protected Health Information

We are required by law to disclose your protected health information in the following circumstances:

**Abuse or Neglect
Government Agencies**

We will not disclose your protected health information in the following circumstances:

Research or Marketing Health-Related Services

For more information about our privacy practices, or for additional copies of this Notice, please contact us at:

Privacy Officer
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Email: drclemons@smilesbyclemons.com
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For More information about HIPAA or to file a complaint:

U.S. Department of Health & Human Services
Office of Civil Rights
200 Independence Ave., S.W.
Washington, DC 20201
(202) 619-0257 Office
(877) 696-6775 Toll Free

