

Dan D Banh, DDS, MS, Inc
Board Certified Orthodontist



COVID-19 Informed Consent

Thank you for your continued trust in our practice. As with the transmission of any communicable disease like a cold or flu, you may be exposed to COVID-19, also known as “Coronavirus,” at any time or in any place. Be assured that we have always followed state and federal regulations and recommended universal personal protection and disinfection protocols to limit transmission of all diseases in our office and continue to do so.

Despite our careful attention to sterilization, disinfection, and use of personal barriers, there is still a chance that you could be exposed to an illness in our office, just as you might be at your grocery store or pharmacy. “Social Distancing” nationwide has reduced the transmission of the Coronavirus. Although we have taken measures to provide social distancing in our practice, due to the nature of the procedures we provide, it is not possible to maintain social distancing between the patient, Dr. Banh, staff and sometime other patients at all times.

Although exposure is unlikely, do you accept the risk and consent to treatment?

Yes _____ No _____

Patient/Parent signature

Date

Patient Name (printed)

If you, your child, or others accompanying you to any appointment have:

- | | | |
|---|---------|--------|
| - A fever (defined as above 99.6 degrees)? | Yes ___ | No ___ |
| - A cough? | Yes ___ | No ___ |
| - Shortness of breath/trouble breathing? | Yes ___ | No ___ |
| - Persistent pain, pressure, or tightness in chest? | Yes ___ | No ___ |

*** If the answer to any of these questions is YES, please see our front desk to reschedule your appointment.**

Thank you!

Important Notice: Due to rising cost of PPE, an additional \$10 per visit will be charged to your insurance only if applicable