



Patient Advisory and Acknowledgement

Receiving Dental Treatment During the COVID-19 Pandemic

Dear Patients:

You have come to our office today for a routine dental evaluation and/or treatment that will be done during the COVID-19 pandemic. Please be advised for the following:

While our office complies with State Health Department and the Centers of Disease Control and Prevention infection control guidelines to prevent the spread of the COVID-19 virus, we cannot make any guarantees.

Our staff are symptom-free and, to the best of their knowledge, have not been exposed to the virus. However, since we are a place of public accommodation, other persons (including other patients) could be infected, with or without their knowledge.

In order to reduce the risk of spreading COVID-19, we have asked you a number of “screening” questions below. For the safety of our staff, other patients, and yourself, please be truthful and candid in your answers.

Are you currently awaiting the results of a Covid-19 test? Yes No

In the last month have you have any of the following symptoms: Yes No
fever, gastrointestinal upset, headache, fatigue cough, shortness of breath

Have you experience new loss of smell and taste? Yes No

Are you in contact with any confirmed COVID-19 positive patients? Yes No

Do you have heart, lung, kidney disease, diabetes or auto-immune disorders? Yes No

Patient Signature

Date