

To our valued patients,

Everyone at Canal Family Dentistry, Inc., is committed to maintaining the privacy we believe our patients deserve. We are adhering to the Federal Privacy Act by taking courses, filling out numerous forms, and updating our procedures amidst constant changes to this legislature. Our office already complies with most of these regulations; however, we do need a family permission slip to continue our notification practices. Again, we are not changing the way we notify you, we are only asking that you acknowledge our existing office policy. You will find a list of our notification practices below. Please take a moment to read them before you sign.

- Leave a message with a member of the household concerning appointments
- Submit your insurance electronically
- Contact your insurance company on your behalf, if warranted
- Send your appointment reminder postcard through the mail
- Send lab cases to our labs with your name on the case, to avoid confusion
- Discuss your case with the lab, by phone or by mail
- Treat minor children and discuss treatment with their parents or guardians
- Allow interoffice communication concerning treatment
- Allow the office to hang up schedules of the day in unobtrusive places
- Allow our office to discuss your pertinent treatment with referring doctors
- Other times your names might be used in the day to day normal events of a dental office

We hope you understand that we are trying to comply with a myriad of confusing regulations written in a way only a politician can understand. We assume that many more changes will occur to these acts of congress. We will try to maintain as current compliance as possible.

Sincerely,

Canal Family Dentistry, Inc.

By signing below, we give permission to Canal Family Dentistry, Inc., to the best of their ability, to treat our family and understand our rights to privacy. Canal Family Dentistry, Inc. will not use any of our personal information or treatment information, including names, social security number, phone number or financial information, in any way that is not connected with the proper dental treatment of our family.

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SIGNATURE

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DATE