



Pediatric Dentistry & Family Orthodontics

*Andrew M. Arcuri, DDS, MS
Michael B. Quigley, DDS
Michael J. Weinstein, DDS
Young H. Son, DMD
Derek P. Nguyen, DDS*

5538 North Burdick Street
Fayetteville, NY 13066

www.pediatricdent.com

Phone (315) 637-6961
Fax: (315) 637-0169

To Our Pediatric Patients and Adult Orthodontic Patients:

We are committed to providing you and your child with the highest standard of dental care and we welcome you into our practice! We will strive to make all your dental experiences positive and pleasant. In order to achieve these goals and focus on caring for you and your child, we need your assistance and understanding of our office policies.

We require that a parent or legal guardian accompany each child for all dental visits at our office.

We invite parents to come back into the examining room for their child's first visit to see our office and discuss our treatment procedures. However, in order for us to establish a trusting relationship with your child, there may be times that we ask parents to remain in the reception area. Successful dental visits require full attention and concentration between the dentist, the dental staff, and your child. We do realize that each child is different, and we would be happy to discuss your individual situation.

Our office does not directly participate with any insurance companies, with the exception of: Child Healthcare Plus through Fidelis/DentaQuest, Delta Dental, Cigna, UMR, Lifetime Benefit Solutions through Crouse Hospital only and Orthodontic services. However, we are happy to submit your dental insurance claims for you to any dental insurance.

Patient portions for Fidelis/DentaQuest Child Healthcare Plus, Cigna, Delta Dental, Lifetime Benefit Solutions through Crouse Hospital and UMR are due at the time of service. All other payment is due in full at the time services are rendered.

A financial agreement for orthodontic services can be worked out prior to the start of treatment. We accept cash, personal checks, all major credit cards and Care Credit. Please do not hesitate to ask questions about our financial policy. Service to our patients is at its best when there is complete understanding and mutual cooperation.

Depending upon the type or length of appointment you are scheduling, you may be required to make a deposit of \$35 dollars. The deposit will be used as a credit for that appointment. If you cannot keep your dental appointment, we ask that you notify us 2 business days in advance of the scheduled appointment. This will allow us sufficient time to notify another patient who needs our care.

If you fail to come to your scheduled appointment or you are unable to give advanced notice of 2 business days as requested, you may be; charged a missed appointment fee, asked to make a deposit to reschedule, your deposit may be used as a missed appointment fee, or unable to schedule any further appointments. We realize that unexpected changes happen, however we ask for your assistance and understanding in this matter.

Please arrive 15 minutes prior to your appointment time, with your completed paperwork.

This will allow our business team ample processing time. If you should have any questions regarding the above information, please don't hesitate to ask. We will be happy to help you in any way possible, and look forward to making your child's dental experience easy and enjoyable!

Building Smiles, Faces & Self- Esteem the Fun, Gentle, and Easy Way