

PATIENT BILL OF RIGHTS & RESPONSIBILITIES

PATIENT BILL OF RIGHTS:

As a patient of Smilesinc. we encourage you to play an active role in your dental care. You have the right to respectful and non-discriminatory care. You should always:

- Be treated with dignity, courtesy, respect and confidentiality regardless of ethnic origin, gender, religious beliefs or sexual orientation.
- Have all information about your dental care including your dental chart stored confidentially in our software system.
- Be informed if your personal information is shared to any other medical or dental office for continued care and be asked to sign a release document. We can assure you that we comply with P.I.P.A. regulations and your personal information is never shared with any marketing company.
- Be informed about the services we provide and informed of your treatment options along with the risks and benefits of any of these options. Informed consent is attained from you and that you understand your treatment before it is started.

PATIENT RESPONSIBILITY:

As a patient of Smilesinc. we ask that you:

- Be on time for your appointments and give 24 hours cancellation notice.
- Please confirm your appointments via our reminder system or by phone.
- Keep your personal information up-to-date in our system.
- Settle your co-payment at the time of your visit.
- Take medications as prescribed and book treatments recommended to you by your Dental team.
- Treat other patients, staff and Doctors with respect at all times. Our office does not tolerate any violence, bullying or harassment and if this occurs, or we may discontinue patient care.

PRINT NAME: _____

SIGNATURE: _____ DATE: _____

We value patient feedback so please forward any questions or concerns to manager@smilesinc.bm