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COVID-19 Pandemic Dental Treatment Notice & Acknowledgement of Risk Form

Patient Name (print): _____ Date: _____

Our goal is to provide a safe environment for our patients and staff and to advance the safety of our local community. COVID-19 is a serious and highly contagious disease that the World Health Organization (WHO) has classified as a pandemic. This document provides information and protocols we have put in place based on statements from the Centers for Disease Control (CDC), State Health Department, American Dental Association (ADA), Academy of General Dentistry (AGD), Virginia Dental Association (VDA), and Virginia Board of Dentistry. We ask that you print and complete this prior to your arrival, and initial next to each one to indicate your understanding and acknowledgement of the information and the measures implemented. **DO NOT FORGET TO BRING IT WITH YOU TO YOUR APPOINTMENT!!!**

General Information:

_____ While our office complies with all guidelines to prevent the spread of the virus, we cannot make any guarantees. Our team is symptom-free and, to the best of our knowledge, has not been exposed to the virus, though COVID-19 has a long incubation period. However, since we're in a place of public accommodation, other persons, including other patients, could be infected with or without their knowledge, not exhibit symptoms, and yet still be highly contagious. Determining who is infected by the virus is not within the scope of our practice, currently, due to the limited availability of virus testing and lack of legislation for dental practices to do so.

_____ Due to the frequency of visits by other patients, the characteristics of the virus, and the continuous aerosols dentistry creates, there's an elevated risk of you contracting the virus simply by being in a dental office. You could also contract it from outside this office, the parking lot, or somewhere unrelated to your visit.

_____ I will inform Dr. Dina's office if I test positive for COVID-19 up to 3 weeks after the date of my visit.

_____ I will refer to Dr. Dina's website to stay abreast of the measures she and her team are taking to ensure our safety in their office, as well as protocols and changes to how appointments will be scheduled and handled. Website address: www.dr-dina.com

Protocols:

_____ I am required to wear a face covering to enter the office, and again when treatment is complete, in order to check-out at the front desk and exit the office.

_____ I will call Dr. Dina's office upon my arrival and wait in my car until they call me back and inform me they are ready for me to enter.

_____ Companions are not allowed to enter the dental office unless legally required, such as a health aid, support for the visually impaired, etc...

_____ I am required to perform hand sanitization immediately upon entering the office, either with the supplied alcohol-based hand rub or soap/hot water for 20 seconds. (And, 20 seconds is the actual scrubbing time excluding drying with towels afterwards, in case you didn't know! 😊)

_____ My temperature will be taken after hand sanitization to ensure I don't have a fever.

_____ I will be required to do a supplied pre-rinse with diluted hydrogen peroxide before beginning any procedure.

_____ It is required to use high-volume evacuation techniques and dual suction to minimize aerosol spread, for any and all procedures. Dr. Dina will use either the Dry Shield, Rubber Dam, or Re-Leaf system, in combination with standard high/low suction. If I refuse the use of these techniques, or cannot tolerate them, Dr. Dina will be unable to perform any treatment and the appointment will be cancelled.

_____ **A \$14 fee for PPE (Personal Protective Equipment) will be collected from ALL patients (except those covered by Delta Dental or Cigna Dental) at the end of each appointment.** *The cost of masks, for example, have gone up by 4300%! That is not a typo.)

Patient/Legal Guardian Signature

Date