



Dean J. Kokinias, D.D.S.

WELCOME

We are delighted to welcome you to our practice and are pleased that you chose us to serve your dental needs. We look forward to seeing you on a regular basis. We continue to grow with your recommendations.

Office Hours

Our standard hours are Monday through Friday 8:00 a.m. – 5:00p.m. Saturday 8:00 a.m. – 1:00 p.m., closed Wednesday.

Appointments

In the event that you cannot make your scheduled appointment, kindly provide us with a minimum of 24-hour notice of change. We would be glad to reschedule the appointment at a more convenient time if necessary. Appointments not cancelled within 24 hours of the appointed time will be subject to a fee of \$25 per half hour of scheduled time. If you have dental insurance, these charges will be incurred by you personally and not by your insurance company.

Payment

Payment for treatment is required at the time of service for balances not covered by insurance. We do our best to estimate the amount of your copayment. Since this is an estimated amount, any difference between our copayment estimate and the amount your insurance actually pays remains your responsibility. In the event your account becomes past due and is turned over to collection, you will be responsible for all cost of collections, including collection agency fees, attorney fees and court costs not to exceed 50%.

Patient Communication

We may call your home, cell or other designated location and leave a message on voice mail, send emails or text messages in reference to any items that assist the practice in carrying out treatment, payment and other operations, such as appointment reminders, insurance items and any call pertaining to your dental care, including treatment planning.

Patient Signature

Print Name

Date

Staff member _____