

Grand Haven Family Dentistry
Peter D. Rick, DDS, Chelsea Klipfel DDS
919 S. Beechtree St., Suite 7
Grand Haven, MI 49417-2384

Dear Patient,

We would like to welcome you once again to our dental practice and explain a little about our office policies and goals. We believe in the theories of Modern Dental Care which do not support the old premise of "When it hurts-fix it." Through proper preventative care and regular checkups, we believe that it is highly likely that most of our patients can expect to keep all of their teeth for all of their lives.

Our patients can expect from us:

1. A high degree of professional skill and ability.
2. A dedication to your oral health care.
3. A minimization of costly reconstructive work through proper preventative care.
4. The highest effort to make your visits as comfortable as possible.
5. The right treatment at the right time.
6. Fees that are fair and just for the services provided.

In return, we expect from our patients:

1. Cooperation in making and keeping appointments.
2. A conscientious effort toward good oral hygiene.
3. Recall visits to maintain optimum oral health.
4. A definite arrangement for the payment of fees at the time of service.

In order for our newly formed relationship to be mutually satisfying and beneficial, we ask that any time you have a question or are unhappy about any treatment (proposed or performed), fee for service, attitude of our "Dental Team", you will discuss it with us promptly and openly. Misunderstandings and/or lack of communication are the only obstacles to our continued friendship and professional relationship.

New patients may require more than one visit, depending on services needed. A determination will be made at the first visit. Please understand the first visit will consist of an examination, measurements, and/or tests as well as appropriate radiographs will be taken to determine the course of treatment. A prophylaxis or cleaning will not be performed at the first appointment.

We Have enclosed our patient and health questionnaire to enable you to fill out the front and back sides prior to your appointment. Please send back the completed form in the enclosed, self-addressed, stamped envelope. We look forward to our professional relationship.

Sincerely,

Peter Rick