

**Dr. Linnea Westerberg, DDS, MS, RN**  
**990 Sonoma Avenue, Suite #16 | Santa Rosa CA, 95404 | (707) 571-7890**

**Patient Treatment Acknowledgement Form**

In order to eliminate any misunderstanding which may inhibit our ability to provide you with the highest quality of dental service, we have developed the following acknowledgement form stating your responsibilities as a patient.

**Please read this carefully prior to signing the bottom of this page.**

As your dental caregiver, we do our best to inform you of needed treatment (cleanings, fillings, crowns, root canals, referral specialists, etc.) It is your responsibility as a patient of record at this office to follow through with all treatment recommended by our office. If any or all recommended treatment is not addressed complications may occur, including but not limited to pain, bone loss, gum disease, tooth fracture, infection, and possible tooth loss. The office warranties are void as well if recommended treatment is not addressed.

**Cleanings:** At every appointment you have with the hygienist, the hygienist will discuss with you a recommended cleaning schedule (i.e. 3 month, 4 month, 6 month or scaling and root planning). Reminder postcards and phone calls will be done as a courtesy for you, however, it is ultimately your responsibility as a patient of record at this office to schedule and follow through with your recommended appointment.

**Fillings:** After any composite restoration is diagnosed it is your responsibility to schedule and follow through with the recommended treatment. In some instances, the tooth may not be able to be restored with our composite restorations due to extent of decay. In this case a crown procedure may be needed. If the decay extends into the pulp chamber, root canal therapy may be needed. We will do our best to diagnose as accurately as possible but sometimes, even with the information provided on x-rays, the extent of the decay is uncertain until it is being removed. All composite restorations done in our office include a two year warranty as long as you are a patient of record and maintain your cleaning schedule as recommended by our office.

**Crowns:** After any crown restoration is diagnosed it is your responsibility to schedule and follow through with the recommended treatment. All crown restorations done in our office include a one year warranty as long as you are a patient of record and maintain your cleaning schedule as recommended by our office.

If recommended treatment is delayed, it is then a possibility that the above mentioned complications may occur, which could result in a more costly procedure. As with any recommended treatment our office will recommend the least invasive procedure as to preserve remaining tooth structure. However, any time a tooth receives treatment, there is a chance that the root canal system may become irritated and root canal therapy may be indicated.

**Referrals:** At any time our office may elect to refer you to a Specialty Office for evaluation and/or treatment. It is your responsibility to contact the Specialty Office and follow through with recommended evaluation and/ or treatment.

I (We) agree and understand my options and obligations as described above. I (We) release Dr. Westerberg's office of liability for incompleteness of treatment.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_