

Greenbrook
DENTAL GROUP, S.C.

A note to our Patients:

The Federal Government requires lots of "fine print" in the "Notice of Privacy Practice" which is posted in the reception area (copies available at the desk). We can sum it up much more simply: **We have never, and will never, share or release any information about you to anyone else without your permission, or as required by a legal subpoena. Period.**

We do ask your written permission to send information to your insurance carrier specifically related to pre-estimate of dental benefits, or for claims following treatment. Unless you have any questions, please sign off on the two statements that follow, so we are in compliance with the new law:

1. I have read, and received a copy (if desired) of the "Notice of Privacy Practices" of Greenbrook Dental Group, S.C.
2. Having read the "Notice of Privacy Practices", I authorize Greenbrook Dental Group, S.C., and consent to the use, disclosure, and release of information to carry out treatment, pre-determine benefits, and submit claims for payment to my insurance carrier.

Signature of patient or responsible parent

_____/_____/_____
date