



Advantage Dental Clinics, LLC
The Advantage Community

AUTHORIZATION FOR FLUORIDE VARNISH AND DENTAL HYGIENE SERVICES

Advantage Dental Clinics, LLC ("Advantage") has collaborated with Umatilla-Morrow Head Start to provide dental hygiene services at no cost to you. (We will attempt to get reimbursement from your insurance carrier whenever possible.) These services, if authorized, will be provided by Advantage and/or one of its representatives. If you want your child to receive these dental hygiene services, please answer the questions below, sign, date this form, and return.

Dental Hygiene Exam ONLY Dental Hygiene Exam & Fluoride Varnish

Name: Pedro Estevan Date of Birth: 8/22/05 Male Female

Dental Insurance: Capitol Willamette Advantage ODS Open Card Private None

Ins. Recipient/Patient ID: # _____ Parent / Legal Guardian: Juanita Esteban

Address: 421 South 2nd St City: Hermiston State: OR ZIP: 97838

Telephone #: Home: 541-567-9421 Work: — Message: —

Date of Last Dental Exam: ø Prescription Fluoride: No Yes

Dentist Name: waiting on provider Any current dental problems? _____

1) No Yes Do you suffer from Asthma?

2) No Yes Do you have any serious Health Problems?
Yes, please explain: _____

3) No Yes Do you have any allergies?
Yes, please list: Peanuts ~ severe allergy

4) No Yes Has your Physician or Dentist ever recommended antibiotics before having teeth cleaned? If yes, please explain: _____

As the legal parent/guardian, I hereby give consent for the child named above to receive from Advantage and/or one of its representative's, hygiene services, which may include cleanings and fluoride varnish, in conjunction with Umatilla-Morrow Head Start. I also hereby consent to the release and exchange of information, including any personal health information, payment, and scheduling information, between Advantage, Umatilla-Morrow Head Start staff, insurance carriers and the Dentist of Record. This consent will remain in effect for 24 months unless revoked by me. **By signing this form, I am also acknowledging that I have reviewed and been offered a copy of Advantage's Notice of Privacy Practices and HIE Notification and the fluoride varnish fact sheet.**

Signature: Juanita Esteban Date: 7/15/09
Legal Parent/Guardian

