

DANNY SHIRI, D.D.S.
RACHEL MARMOR, D.M.D

6310 San Vicente Blvd, Suite 295

Los Angeles, CA 90048

(323) 935-9102-Ph

(323) 935-1939-Fax

OFFICE POLICY

APPOINTMENTS

It is our goal in this office to give you, as our patient, the best care and treatment possible. Your appointment time is reserved especially for you. If for some reason you are unable to keep this time, Dr. Shiri appreciates as much notice as possible. Should you need to reschedule your appointment, **cancellation notice given less than 24-hours may be subject to a “Late Cancellation Fee”**. The amount could vary depending upon how much time has been reserved for you. Missed appointments without notice will be charged. True emergencies will be taken into consideration and would be exempt from this policy.

Initials

FINANCIAL ARRANGEMENTS

Full payment for treatment is due at the time services are rendered, unless **prior financial arrangements** have been agreed upon. Total fees are the patient’s (or parent/guardian) responsibility.

Initial

DENTAL INSURANCE

As a courtesy to you as our patient, our office will bill all insurance plans and do our best to maximize your annual benefits. Every policy varies in the amount allowed and/or paid for treatment. **It is the patient’s responsibility as the policyholder to know exactly what your plan will cover for each service, and when your annual maximum expires.** We will be happy to assist you in this process.

Initials

I have read and understand the above policy and I accept financial responsibility.

Patient/Guardian Signature

Date

