



DENTAL TREATMENT WARRANTY

Patient's Name: _____ Date: _____

Your prescribed recall appointment frequency is every [] 3 months [] 6 months [] Other _____

Our dental team is proud of the dentistry we provide for you and are confident of the durability of our treatment. Our goal is to not just correct any dental problems you may have, but to show you how to prevent dental problems in the future and to save you time and unnecessary expense. The long-term success of the dental treatment we provide for you depends upon how well you take care of your teeth --- continuing home care of your teeth and gums, regular professional exams, hygiene and fluoride treatments. The products recommended by us for you and the frequency of those professional continuing care visits depends on your individual condition. With that in mind, we are pleased to offer you the following limited dental treatment warranty.

COMPOSITE BONDING OF FILLINGS

For composite (tooth colored) bonding or filling restorations, we will replace or repair them in the event of failure for a period of two years from the date of their initial placement.

DENTAL SEALANTS

Floss and the use of fluoride after dental sealants initial placement will help prevent decay between teeth. We will repair or replace any of our sealants that fracture or break for a period of 12 months from the date of their initial placement.

CROWNS, BRIDGES, INLAYS, ONLAYS, AND PORCELAIN VENEERS

If your porcelain restorations fracture with normal use during a period of five years from the date of their initial placement, we will replace or repair them at no additional cost to you.

CONDITIONS

To keep this warranty valid, you must:

1. Keep your prescribed regular continuing care appointments with no appointment varying more than 30 days of our recommended schedule.
2. Maintain your account in good standing.
3. Have all ideal recommended dental treatment performed by Dr. Shannon's office with the exception of treatment that is recommended elsewhere by our office. This warranty does not cover procedures not mentioned above, including gum line desensitization, night guards, nor does it cover damage to teeth or dental prosthesis caused by trauma, accidents, abuse, neglect or improper use (e.g. clenching, grinding, chewing ice or biting on non-food items).