



Trophy Smiles

Arthur Reynolds Jr. & Associates

601 Fayetteville Street  
Suite 100  
Durham, NC 27701  
919-973-0178

Trophysmilesdurham@gmail.com

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## Office Rules & Policies

1. All patients who are over 18 years of age must show their picture ID
2. If applicable, co-payments must be paid at time of visit.
3. All patients must show their current Insurance/ Medicaid Card
4. Patients must have their current health information with all prescribed medications.

### For All Appointments

1. There is a \$50 charge for short notice or less than 24-hour cancellations or no show appointments. If your appointment is more than 1 hour of time, we need 48-hour cancellation notifications. If you are scheduled to see the Hygienist and Doctor this is considered as two separate appointments. If you receive 3 or more broken appointments you will be dismissed from our office. **It is your responsibility to remember your appointment time.** However, we will remind you with a courtesy call.
2. If you must cancel, you must call at least 24 hours before your appointed time.
3. All appointments need **to be confirmed by 3 pm the day before your appointment** by calling the office. You may leave a phone message if after normal business hours. Your appointment may be cancelled if you do not call to confirm.
4. If you have small children and must bring them with you to your appointment, a responsible person must accompany you to care for the children during your appointment time to maintain our schedule and to respect other patients and staff.
5. If you change your phone number, address or Insurance information please call and provide our office with the updated information.
6. Any broken appointment on a Saturday (if applicable) will result in a six-month suspension.
7. There is a \$30 charge for all returned checks. Our office has Check Track account through our bank that automatically debits your account for the face amount plus a \$25 processing fee.
8. Any appointment **15 minutes later** or more may be rescheduled and charged a fee.
9. Any appointments that require more than an hour appointment time, that is broken, you may be required to pay an upfront deposit before the appointment is rescheduled.

***Children under 18 will not be seen unless accompanied by a parent/guardian.***

***Children under 12 are not allowed in reception area without adult supervision.***

***Parents are not allowed in the treatment area while dental procedures are being performed due to limited space.***

***I have read and understood the clinic's rules and policies and do hereby agree to all above.***

**Signature: \_\_\_\_\_ Date: \_\_\_\_\_**