



150 4th Avenue, Brooklyn, NY 11217 (between Butler St. & Douglas St.)
 (718) 488-0200

COVID-19 Health Consent Form

Have you, your child, other accompanying persons with you today tested positive for or been diagnosed with COVID-19?

Yes No If so, when? _____

You have come to our office today for a routine dental evaluation and/or treatment that will be done during the COVID-19 pandemic. Please be advised of the following:

The dentists and support staff in this office have always adhered to state and federal infection control protocols, and will continue to in heightened detail, follow these protocols for limiting transmission within our office. As with many cases of transmission, you and/or your child, with or without knowledge, may have been recently exposed to the virus. Social distancing has shown to be a very effective measure in controlling the spread of infection and is practiced consistently in office. However, due to the procedures and service required by our dentist, it is not possible to maintain the ideal distance (6 feet) between patient and dentist.

Although exposure is unlikely, do you accept the risk and consent to treatment? Yes No

	YES	NO
Do you have a fever?		
Do you have shortness of breath?		
Do you have a dry cough?		
Do you have a runny nose?		
Do you have a sore throat?		
Are you experiencing sneezing or sinus issues unrelated to allergies?		
Have you experienced headaches and fatigue?		
Have you lost your sense of taste or smell?		
Within the past 14 days, have you traveled out of the United States?		
Within the past 14 days, have you traveled within the United States?		

If so, where? _____

 Patient Name

 Date



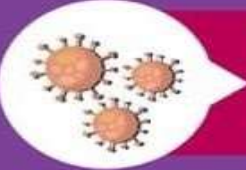







We are looking forward to seeing you at your next appointment. When you arrive to our office, please call or text us. We will give you instructions on the next steps in proceeding with your appointment. Thank you!

Children's Dentistry Trumbull

COVID-19 PROTOCOLS

KEEPING YOU HEALTHY WHILE
KEEPING YOUR SMILE HEALTHY

OUR NEW LOOK WITH PROTECTIVE GEAR

-  Please wear Masks before you enter the office.
-  Please use hand sanitizer when you enter the office.
-  We will ask some screening questions relating to the COVID-19.
-  Leave your cell phone number and wait in your car instead of waiting room.
-  no magazines, children's toys, coffees in the waiting room.
-  Only patients with appointments and one guardian permitted into the office.
-  We will measure your temperature and ask you to gargle with 1% hydrogen peroxide.
-  Social distancing in effect maintain 6 feet of distance at all times.
-  Please allow us enough time for enhanced disinfection between patients.
-  Please reschedule if anyone in your household has been sick in the last 2 weeks.