

EASTERN INTERNATIONAL COLLEGE
DENTAL HYGIENE PROGRAM
ADULT CONSENT

Patient Name _____

Patient's Date of Birth _____

The Eastern International College Dental Hygiene Clinic is the clinical education site for Eastern International College Dental Hygiene students. Student dental hygienists, under the supervision of licensed dental hygiene, licensed dentist and dental faculty, provide preventive dental services to the public (dental examinations, prophylaxis [cleanings], oral hygiene instructions, fluoride treatments, pit and fissure sealants, and radiographs). The EIC Dental Hygiene Program provides treatment to all patients and does not discriminate against individuals with disabilities or infectious diseases.

This form must be completed by the patient (18 years of age or older) or a parent/guardian of the patient (those under 18 years of age or unable to complete the form without assistance). The consent for treatment of Minors and Dependents must be completed for each visit if the Parent/Guardian/ Designee is unable to be present for treatment.

I understand the information listed below of dental services at the EIC and that the Dental Hygiene Clinic is a teaching institution and the dental services provided are limited to preventive dental services.

1. The preventive dental services are provided by student dental hygienists, working under the supervision of licensed dental hygiene and dental faculty. Because the individuals providing care are students, any care delivered is closely monitored and evaluated by dental hygiene faculty. This process requires additional time and appointments at the Clinic are longer than routine visits in a private dental office.
2. In order to provide safe, effective dental care, patients are requested to complete medical and dental histories. Should there be a need to consult with the patient's dentist or physician for the purposes of clarifying a dental and/or medical condition, the patient will be asked to provide permission for such consultation.
3. The confidentiality and safety of dental hygiene records are closely maintained. Patient consent will be obtained for the release of any patient information, with the exception of information released to public or private payers designated by the patient.
4. Student dental hygienists will inform patients regarding procedures being performed.
5. Every effort is made to refer patients for any additional dental care identified in the course of treatment at the Eastern International College Dental Hygiene Clinic. At the patient's request, any records, including dental x-rays, will be sent to the patient's dentist.

I understand the conditions described above and agree to receive preventive dental care.

Patient Name: _____

Signature of: _____

(Please circle one: Patient/ Parent/ Guardian/ Designee)

Date: _____