



**A great big HI HOWDY to everybody. I hope this message finds you happy and healthy. And that the social distancing and home isolation hasn't thrown your world into a total tailspin. It's been a challenging few weeks for sure. We wanted to let you know that we've been cleared to start seeing patients again.**

Dr Barnett has only one goal: to continue to provide each of you with the best care possible. We've always had infection control protocols in place and implemented in our practice. In addition to our regular procedures, we are also doing our best to maximize the physical space between treatment chairs and to spread out appointment times. Each of you should feel safe and comfortable in continuing your treatment without further interruption.

We do, however, need to ask for your help with a couple of things:

1. To minimize the potential for exposure to the corona virus we ask that when possible only the patient comes into the office for their appointment. Children 12 and under are welcome to bring 1 parent inside with them. We're otherwise asking parents and siblings to please wait in the car for now.
2. Please make sure we have a good cell phone number for you. We will be asking you to wait in the car until we're ready for you. Please call when you arrive at the office for your appointment. An assistant will call you back or text you or come and get you when it is time to come in.
3. We'll have bottle of hand sanitizer outside the door for you to use before you come in AND once in the office we'll ask you to wash your hands before we treat you.
4. We'll also be scheduling future appointments by phone/text message so we don't have a group of people gathered at Nina's desk.
5. We'll be taking the temperature of everyone that comes into the office including our staff. Anyone with a temperature of 100.4 or higher will need to be rescheduled.
6. I know this will be a huge inconvenience, but in the short term we request that everyone come to Richfield for appointments.
7. Please brush and floss before you come to your appointment.
8. WE NEED A COVID 19 Consent Form signed or done over the phone as soon as possible.

We are doing all of the above out of an abundance caution and in an effort to do our part to minimize the spread of this little critter. If we all work together, we can get through this sooner rather than later. Since this is a fluid situation, we'll continue to make adjustments as we need to. Thanks for your understanding and patience. This hasn't been easy on any of us but we're taking positive steps to get back to normal.

Please feel free to contact us if you have any questions or concerns,

Your Barnett Orthodontics Team

**General Dental Treatment Consent Form**  
**COVID-19 Pandemic**

1. I knowingly and willingly consent to dental treatment by Dr. Richard L Barnett, DDS and any designated associates and employees during the COVID-19 pandemic.
2. I understand that Dr Richard L Barnett, DDS is following CDC guidelines as far as treatment protocols and infection control.
3. I am unaware of being a possible carrier or infected: I confirm that I have not tested positive for COVID-19 in the last 30 days and that I am not presenting with any of the following symptoms of COVID-19:
  - A. Fever of 100.5 degrees Fahrenheit or 38.1 degrees Celsius or higher
  - B. Shortness of breath
  - C. Dry cough
  - D. Runny nose
  - E. Sore throat.
  - F. Diminished sense of taste and smell
4. Contact with infected: I confirm that I have not knowingly been in close contact defined as 6 feet or less for a duration of fifteen minutes or more with someone who has tested positive for COVID-19 in the last 14 days, or with anyone that has had the above stated symptoms in the last 14 days.
5. Public travel: I confirm that I have not traveled outside of the United States in the past 14 days. I confirm that I have not traveled domestically by commercial airline, bus, or train within the last 14 days.
6. I understand the COVID-19 virus has a long incubation period during which carriers of the virus may not show symptoms yet are still highly contagious. It is impossible to determine who has it and who does not given the current limitations and availability in COVID-19 viral testing.
7. Risk of transmission: I understand that due to the frequency of visits of other dental patients, characteristics of the virus, and the characteristics of dental procedures, that I may have an elevated risk of contracting the virus simply by being in a dental office, even though CDC and Utah Department of Health guidelines are being observed.
8. **INFORMED CONSENT:** I have been given the opportunity to ask any questions regarding the risks of contracting COVID-19 from the dental office and dental procedures. I reaffirm that I am not a carrier of COVID-19 nor infected with COVID-19 to the best of my knowledge. I do voluntarily assume any and all reasonable medical/dental risks, including the substantial and significant risk of serious harm, if any, which may be associated with any phase of my treatment as a result of the COVID-19 pandemic. I acknowledge that the nature and purpose of the dental procedures recommended have been explained to me if necessary and I have been given the opportunity to ask questions.

\_\_\_\_\_  
Patient's name (please print)

\_\_\_\_\_  
Signature of patient, legal guardian or authorized representative      Date

\_\_\_\_\_  
Witness to signature

\_\_\_\_\_  
Date