

Dana Hodge King, D.D.S.
7870 Broadway B-102
San Antonio, TX 78209
210-829-7826

Authorizations

In case of emergency, contact:

Name _____ Relationship _____
Home _____ Work _____
Cell _____

Who may we thank for referring you to us?

Our office uses fluoride in some instances. Please initial your preference:

_____ I prefer to NOT receive fluoride treatments
_____ Yes, you may administer fluoride treatments as recommended by Dr. King

With whom may we discuss the following information? (circle)

Appointment Time, Date, Reason
(for confirming appointments) anyone answering..... me only.....Listed: _____

Treatment anyone answering..... me only.....Listed: _____

Account / Financial info anyone answering..... me only.....Listed: _____

Which method would you prefer we use to confirm appointments?

_____ E-mail _____ Cell _____ Home _____ Work
_____ Other: _____