

DEAR LRM PATIENT, WE WANT TO LET YOU KNOW THAT WE ARE STILL TAKING GREAT PRECAUTIONS DURING THE COVID-19 CRISIS. WE ARE NOW IN STAGE 2 OF ALBERTA'S HEALTHCARE RE-LAUNCH AND CONTINUE TO OBSERVE PRECAUTIONARY MEASURES TO HELP PREVENT THE SPREAD OF COVID-19 IN OUR COMMUNITY.

YOU ARE BEING SEEN TODAY BECAUSE WE VALUE YOUR DENTAL CONCERN AND HAVE SET ASIDE THE TIME AND RESOURCES TO DELIVER SAFE, QUALITY CARE FOR YOU AND YOUR FAMILY. IT IS VERY IMPORTANT FOR US THAT YOU AND OUR STAFF STAY HEALTHY AND PROTECTED DURING YOUR VISIT. HERE ARE SOME VERY IMPORTANT GUIDELINES TO OBSERVE BEFORE, DURING AND AFTER EVERY DENTAL APPOINTMENT:

BEFORE YOUR APPOINTMENT:

- PLEASE COMPLETE THE NEW PATIENT FORM IF NEEDED.
- PLEASE READ AND ANSWER THE PATIENT CONSENT FORM.
- PLEASE COMPLETE THE COVID19 PRE-SCREENING QUESTIONNAIRES.

PLEASE PRINT AND FAX OR EMAIL THESE FORMS BEFORE YOUR APPOINTMENT (1-2 DAYS) TO:

RECEPTION@LRMDENTAL.COM OR TO FAX# 780-8518720.

UPON ARRIVAL AT THE CLINIC:

- PLEASE CALL FROM YOUR VEHICLE TO ALERT US THAT YOU ARE IN THE PREMISES. WE WILL INSTRUCT YOU IF YOU NEED TO WAIT OUTSIDE IF NEEDED TO AVOID CONTACT WITH OTHER PEOPLE IN THE RECEPTION AREA.
- LEAVE PERSONAL BELONGINGS IN YOUR VEHICLE (OR THE WAITING ROOM). THESE ITEMS SHOULD NOT BE BROUGHT INTO THE OPERATORY AREA.
- WE ASK THAT **ONLY THE PATIENT** COMES INSIDE THE CLINIC. YOUNG CHILDREN OR THOSE WHO NEED ASSISTANCE MAY BE ACCOMPANIED BY A PARENT OR GUARDIAN BUT WILL BE REQUIRED TO LEAVE THE OPERATORY OR STAY ONLY IN THE WAITING AREA.
- WE REQUIRE EVERYONE ENTERING THE DENTAL OFFICE (PATIENTS AND DENTAL HEALTH CARE PROVIDERS) TO **WEAR A FACEMASK OR CLOTH FACE COVERING.**
- AS SOON AS YOU ENTER, PLEASE HAND-SANITIZE THOROUGHLY. A MOTION ACTIVATED SANITIZER WILL BE BY THE DOOR.
- STAY WHERE YOU ARE AND ALLOW US TO DO ANOTHER PRE-SCREENING BY:
 - CHECKING YOUR TEMPERATURE USING A NO-CONTACT THERMO-SCAN TOOL. PATIENTS WITH ANY SYMPTOMS, NO MATTER HOW MILD, INCLUDING A TEMPERATURE ABOVE 100.4° F WILL BE DISMISSED AND ASKED TO CONSULT THEIR MEDICAL OR EMERGENCY PROVIDER.
 - PERFORMING A COVID19 ACTIVE SCREENING
 - UPDATING US WITH YOUR EMERGENCY DENTAL CONCERN
- IF ABOVE REQUIREMENTS ARE MET, YOU WILL BE ASKED TO PUT ON DISPOSABLE BOOTIES TO COVER YOUR SHOES AND PROCEED TO THE RESTROOM TO WASH YOUR HANDS. (SEE POSTER FOR PROPER HANDWASHING).
- YOU WILL BE GIVEN DISPOSABLE GLOVES AND PAPER-GOWN/BODY-COVER BEFORE THE PROCEDURE.

AFTER TREATMENT:

- BEFORE YOU LEAVE THE OPERATORY, REMOVE THE EYEWEAR YOU WERE USING AND PLACE ON DESIGNATED SPOT.
- WITH YOUR GLOVED HAND, DISCARD PLASTIC BODY COVER/PAPER-GOWN AND THROW INTO DESIGNATED RECEPTACLE.
- REMOVE YOUR GLOVES AFTER AND THROW THEM AWAY AS WELL.
- SANITIZE YOUR HANDS **AGAIN** BEFORE EXITING THE OPERATORY.
- PROCEED TO THE RESTROOM AND WASH YOUR HANDS AND FACE WITH WARM WATER AND SOAP.
- USE CLEAN TISSUES TO SWITCH ON/OFF LIGHT AND TO OPEN/CLOSE BATHROOM DOOR.
- IF FORMS NEED TO BE COMPLETED AND SIGNED, YOU MAY CHOOSE TO **USE YOUR OWN PEN** OR USE THE ONE PROVIDED (SANITIZED EARLIER).
- LEAVE THE SIGNED DOCUMENTS ON THE COUNTER OR TRAY.
- BOOK YOUR NEXT APPOINTMENT OVER THE PHONE, IF NECESSARY.

THANK YOU FOR COMPLYING!