

COVID-19 Pandemic Dental Treatment Consent Form

I _____, parent/guardian of _____,
child(ren)/dependent(s) knowingly and willingly consent to have dental treatment completed during the COVID-19 pandemic.

I understand the COVID-19 virus has a long incubation period during which carriers of the virus may not show symptoms and still be highly contagious. It is impossible to determine who has it and who does not given the current limits in virus testing.

Dental procedures create water spray/aerosol, which is how the disease is spread. The ultra-fine nature of the spray can linger in the air for minutes to sometimes hours, which can transmit the COVID-19 virus.

- I understand that due to the frequency of visits of other dental patients, the characteristics of the virus, and the characteristics of dental procedures, that my child(ren)/dependent(s) and I have an elevated risk of contracting the virus simply by being in a dental office. _____ (Initial)

I confirm that my child(ren)/dependent(s) or any person in the household have not tested positive for COVID-19. _____
(Initial)

I confirm that my child(ren)/dependent(s) or any person in the household are not awaiting results of a COVID-19 test.
_____ (Initial)

I confirm that my child(ren)/dependent(s) or any person in the household are not currently presenting or presented in the last 14 days any of the following symptoms of COVID-19 listed below:

- Fever
 - Sore Throat
 - Cough
 - Shortness of Breath
 - Loss of Smell or Taste
 - GI symptoms to include Nausea, Diarrhea
- _____ (Initial)

If yes to any of the above, please explain:

I confirm that my child(ren)/dependent(s) or any person in the household have not knowingly been in contact with someone who has tested positive for COVID-19 in the last 14 days. _____ (Initial)

I confirm that my child(ren)/dependent(s) or any person in the household have not traveled outside the United States by air or cruise ship in the past 14 days. _____ (Initial)

I confirm that my child(ren)/dependent(s) or any person in the household have not traveled within the United States by air, bus or train within the past 14 days. _____ (Initial)

Name _____ Date _____