

**Mahnaz Gorgani, D.M.D.**  
**Natalie A. Vander Kam, D.D.S., Inc**  
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(408) 446-4353

**Patient's Name** \_\_\_\_\_ **Age** \_\_\_\_\_

To assist us in keeping your child's medical history up to date, please answer the following questions:

Has your child had any medical changes, including any surgeries?                      Yes   No  
If so, what? \_\_\_\_\_

Is your child taking medication at this time?    Yes   No  
If so, what? \_\_\_\_\_

Has your child had radiation and/or chemotherapy within the last year?              Yes   No

Do you have concerns regarding your child's dental health?                              Yes   No  
If so, what? \_\_\_\_\_

Do you consent to diagnostic dental X-rays on your child today, if requested by the Doctor?  
Yes   No

We are very sensitive to the schedules of working parents and many of our families have indicated that they prefer we do not interrupt them with a phone call reconfirmation of appointments. We find the majority of our families are happy to take responsibility for the appointments they have booked. Our office will continue to send an email and/or text 3 weeks prior to the scheduled appointment as well as a text/email reminder 48 hours prior to the appointment. It is our pleasure to call and remind families by phone, however, it will now be done only if requested.

We do understand that schedules change and ask that we receive at least 48-hour notice to change your appointment. Should we not hear from you, of your need to reschedule, at least 48 hours prior to your scheduled appointment, a charge of \$50 will be assessed to your account for hygiene appointments and \$75 for operative appointments. We do understand that emergencies occur, and these situations will be handled on an individual basis.

**X** \_\_\_\_\_  
**Parent/Guardian Signature      Relationship to Patient      Date**