



Consent for Treatment

I hereby give consent to the WAVE Clinic to provide me with basic oral health care, the need for and the cost of which will be explained to me before it is delivered. I understand and agree that the services provided to me may include assessment procedures (including x-rays and photographs), diagnosis, treatment planning, teeth cleaning, oral self-care, preventive services (fluoride, sealants, tooth whitening, sports guards), limited treatment of decayed or infected teeth, and/or the fabrication of dentures. I consent to the administration of necessary local/topical anesthetics when applicable.

I understand and agree that my treatment will be carried out by students only, as part of their educational training, and under the direct supervision of regulated dental hygienists, denturists, dentists and certified dental assistants, as appropriate.

I consent to the WAVE Clinic and its students using my personal information in accordance with its Privacy Statement and Privacy Policies and in accordance with applicable legal requirements. As part of this, I understand that they may communicate with my Health care provider and/or oral health care provider in order to obtain information about my health history, and the release or request for Radiographic images along with any diagnostic aids. I hereby consent to my health care provider and/or oral health care provider to supply the WAVE Clinic with any information that they deem appropriate for the purposes of my oral health care at the Wave Clinic.

WAVE Clinic Regulations

Please be assured that every staff person in our office is committed to ensuring that you receive the best quality dental care. In order to support us in this effort, we ask that you and your family members follow these procedures and regulations.

1. A **limited number** of patients are accepted into the George Brown College Centre for Health Sciences Dental Clinic (“the WAVE Clinic”) based on their compatibility with the Clinic’s educational objectives. Not every individual will be suitable to become or remain a WAVE Clinic patient and it is within our sole discretion to determine whether a prospective patient will be, or an existing patient continues to be, suitable for the Clinic. In making this determination, we will consider such factors as:
 - The types and extent of dental treatment that you require
 - The complexity of your medical history
 - The compatibility of your treatment needs with our educational program
 - Patient management considerations

Each prospective patient will be assessed prior to becoming a patient of the WAVE Clinic and periodically thereafter. If at any stage you are determined to no longer be a suitable patient of the WAVE Clinic, you may be asked to seek health care in an alternative facility. Please be assured that these decisions are taken in the best interests of both you and the students of the WAVE Clinic.

2. As a patient, you will be expected to provide an accurate account of your personal contact information and health history as part of the assessment phase of care, and to update this information as appropriate.
3. **All patient treatment will be provided by students, including visiting University of Toronto Dental Students, under the supervision of one or more regulated dental care professionals.**
4. If you are accepted as a patient into the WAVE Clinic, you may not be able to begin receiving oral health care immediately. This is because each of our students is assigned new patients at specific times of the year in accordance with their course of study.
5. Our students care for several patients at a time and have busy academic schedules. Because students are learners, appointments may take longer than they would in a private practice setting. Completion of treatment cannot be assured within a specific time.
6. At the GBC WAVE clinic, we expect our staff, students and visiting patients to work together in a respectful environment. Under the George Brown College’s [Human Rights and Discrimination and Harassment Policy](#), states that “the College believes every member of the College community should experience and contribute to an understanding and respectful learning and work environment that is free from discrimination and harassment.” Any patient or visitor who demonstrates inappropriate behavior may be removed from the premises and/or dismissed, temporarily or permanently, from the participation in WAVE clinic learning environment services at the discretion of the WAVE clinic. Inappropriate behavior includes, but is not limited to, discriminatory, aggressive or abusive conduct towards our staff, clinicians, patients and visitors, as well as intrusions into the privacy and medical confidentiality of others. Sexual harassment under the [Sexual Assault and Sexual Violence Policy](#) is defined as “engaging in a course of vexatious comment or conduct against a person because of sex, sexual orientation, gender identity or gender expression, where the course of comment or ought reasonably to be known to be unwelcome. Making a sexual solicitation or advance where the person making the solicitation or advance is in a position to confer, grant or deny a benefit or advancement and the person knows or ought reasonably to know that the solicitation or advance is unwelcome.”

7. WAVE Clinic fees are to be paid as follows:
 - For dental hygiene and dental assisting services, you must pay in advance.
 - For restorative services, you must pay at the end of each appointment. Fees for treatment are quoted in advance and subject to change if treatment requirements change. You will be notified in advance of any such changes.
 - For Denturism services, you must pay half of your fees upon approval of the treatment plan and the other half upon insertion of the dentures.
 - Note that quoted fees are subject to change if treatment is delayed for a long duration.
8. If you have dental insurance or are receiving social assistance, please tell us this at your first appointment. If you have private dental insurance, you must first pay the WAVE Clinic directly for your treatment, and, once the specific treatment is finished, we will provide a completed claim form to you. For ODSP clients, the WAVE clinics will submit the claim on your behalf and payment will be made directly to the WAVE Clinics.
9. Our students have assigned clinic schedules. You must attend the WAVE Clinic during your student's scheduled clinic times and may only receive care in your assigned Clinic.
10. Appointments must be kept punctually. You must provide Twenty-four hours' notice if you need to cancel or change your appointment. Poor attendance will result in dismissal from the Clinic.
11. If you are medically unwell, please do not attend our Clinics. Please contact your student to reschedule.
12. Parents may attend with their **children** who are receiving dental care provided the supervising staff member has given the parent permission and the parent agrees to follow the rules of conduct imposed by the student/instructor. If the parent does not follow such rules of conduct, they may be asked to leave the Clinic treatment rooms and wait in the reception area. If they refuse to do so, the WAVE Clinic will discontinue treatment of the child and refer the child to an outside practitioner.
13. Children whose siblings or parents are receiving dental care are not allowed in the Clinic treatment areas. Nor are they allowed in the reception area unattended.
14. Patients who are unable to speak or understand **English** must be accompanied by an interpreter at every appointment.
15. Patients who require the use of a wheelchair must either be physically able to transfer themselves to and from the dental chair from the wheelchair for their appointments or must have with them a person or persons who are able to complete the transfer for them. Our staff and students are not able to transfer patients to or from wheelchairs.
16. Treatment will be discontinued if any patient does not comply with the above regulations.