



# TOURO

## DENTAL HEALTH

### GUIDE TO PATIENT SERVICES



**Touro College of Dental Medicine**  
AT NEW YORK MEDICAL COLLEGE  
TOURO DENTAL HEALTH



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# Welcome

Dear Prospective Patient,

On behalf of the faculty, staff, and students of Touro College of Dental Medicine, we would like to welcome you to our clinical training facility, Touro Dental Health. Touro College of Dental Medicine is the nation's newest dental school and the first in New York State in nearly 50 years. As such, our modern, technologically advanced dental facility was designed to serve the complete oral health needs of the Hudson Valley by providing a full range of quality, affordable dental care. We are fully accredited by the Commission on Dental Accreditation and staffed by highly-qualified faculty and students who were selected through a rigorous admissions process.

Touro Dental Health is dedicated to delivering outstanding, comprehensive, and patient-centered care, in a comfortable and professional environment. This means that our patients are fully informed of the results of their examination and the different methods that are available to treat their conditions. Our patients actively participate in developing a treatment plan with their dental team that suits their oral health needs. We strongly believe that you must feel comfortable with your proposed treatment recommendations. Therefore, your input is necessary and appreciated.

The health of your teeth and gums can be critical to your overall well-being and Touro Dental Health strongly encourages patients to partner with us in maintaining their oral health. Our faculty, staff and students will educate patients in proper oral hygiene techniques, which are essential to keeping a healthy mouth, and help prevent or control diseases that affect the rest of the body.

Our aim at Touro Dental Health is for you to receive outstanding dental care and have a positive experience each time that you visit. If you would like to share your feedback, compliments or concerns with us, please feel free to contact us at 914-594-2700.



Edward Farkas, D.D.S  
*Vice Dean*



Vivian Pastor  
*Director of Clinical Operations*

## **Our Mission**

The mission of Touro College of Dental Medicine at New York Medical College is to graduate outstanding dental professionals who will utilize a complex knowledge base and sophisticated perceptual skills to deliver excellent health care service to their diverse communities with integrity, compassion, and empathy. The school is dedicated to conducting important educational and clinical research, while providing excellent dental health services to the public.

## **About Touro Dental Health**

Touro Dental Health is the dental training facility of Touro College of Dental Medicine. The purpose of the College of Dental Medicine is to train, and graduate dental practitioners who will return to their communities, and provide excellent care to their patients. What this means is that one or more of our students may be involved in your care. This is always done under the direct supervision of one or more expert faculty members. Patients receive the direct benefits of this faculty-student collaboration, as well as affordable, high-quality dental care with access to a full range of dental specialists under one roof. As such, treatment times may be greater than if performed in a private practice.

**Touro Dental Health maintains clinic compliance policies to ensure a healthy and safe environment for all our patients. A copy of these policies is available upon request.**

## Our Services

Touro Dental Health provides a full range of oral health services for adults and children, including:

- **General Dentistry** – All phases of preventative and restorative dental care including routine dental exams, deep cleanings and fillings.
- **Cosmetic Dentistry** – Veneers, bonding and tooth whitening
- **Implant Dentistry** – Surgical and prosthetic treatments that are supported by dental implants
- **Oral and Maxillofacial Surgery** – Including dental implants, extractions and TMJ and facial pain therapy
- **Oral and Maxillofacial Pathology** – Diagnosis and treatment for oral lesions and conditions
- **Oral and Maxillofacial Radiology** – Production and interpretation of radiographic images, including 3-D CBCT imaging
- **Endodontics** – Root canal therapy
- **Periodontics** – Gum grafting and periodontal maintenance
- **Prosthodontics** – Dental reconstruction, including implants, crowns, bridges and dentures
- **Pediatric Dentistry** – Child-friendly preventative and restorative dentistry
- **Orthodontics** – A full range of orthodontic treatment for children, teens and adults, including braces and Invisalign
- **Dentistry with Sedation** – All levels of oral sedation administered under the supervision of our onsite dental anesthesiologist

## Hours

Touro Dental Health is open Monday through Thursday from 9:00am to 5:00pm and on Fridays from 9:00am to 3:00pm for emergency care and new patients only. We are closed on weekends, holidays and scheduled academic breaks. Please visit our website for our academic calendar: [dental.touro.edu](http://dental.touro.edu)

**To make an appointment or for more information, please contact our Patient Care Coordinators for assistance at 914-594-2700 or [dentalhealth@touro.edu](mailto:dentalhealth@touro.edu).**

## Location Information

Touro Dental Health is located at 19 Skyline Drive in Hawthorne, NY. We provide free car service for our patients to and from all local train and bus stops listed below. Please call us at 914-594-2700 for details. For detailed directions, visit: [dentalhealth.touro.edu](http://dentalhealth.touro.edu).

### DIRECTIONS BY CAR

Touro Dental Health is easily accessible from the Sprain Brook Parkway and I-287. We are located in a New York Medical College building in the Skyline Drive office park. Free parking is available. Follow signs for patient parking on the side of the building closest to Route 9A/Saw Mill River Road and enter through the Ground Level.

**Please call us at 914-594-2700 to coordinate free car service from any of these bus or train stops:**

### DIRECTIONS BY BUS

These Westchester Bee-Line bus routes are located within close proximity:

#### **Bus Routes To Skyline Drive (directly in front of our facility)**

- 27 (limited service): Skyline Drive – Eastview – White Plains Limited

#### **Bus Routes To Westchester Medical Center**

- 40/41/43: Mount Vernon – White Plains – Westchester Medical Center
- 14/17: Peekskill – Ossining – White Plains
- 15: Peekskill – Yorktown – White Plains
- 1C/1X: Bronx – Westchester Community College

*For specific information and schedules, call 914-813-7777 or visit: [www.westchestergov.com/beelinebus](http://www.westchestergov.com/beelinebus)*

### DIRECTIONS BY TRAIN

We are located within 10 minutes of four Metro North stations:

- Hawthorne (Harlem Line): Free car service conveniently located.
- Valhalla (Harlem Line)
- North White Plains (Harlem Line)
- Tarrytown (Hudson Line)

*For train fare and schedule information, call 1-800-METRO-INFO or visit: [www.mta.info/mnr](http://www.mta.info/mnr)*

**If you or your family are unable to receive dental care due to lack of transportation, please call us to discuss your needs and we may be able to help.**

## **What to Expect on Your First Visit**

The first step in becoming a patient is to schedule a screening appointment. This brief appointment will consist of a review of your health history, a comprehensive examination, and necessary radiographs (x-rays) and intraoral digital scans to determine your treatment needs. This appointment is necessary to determine if your oral health needs are compatible with the educational needs of our students and to assign you to the most appropriate dental health team. Touro Dental Health reserves the right not to accept patients that do not fit the criteria of our facility.

### **Preparing for Your Appointment**

On your first appointment you will be asked to provide a detailed medical history and complete other necessary forms. Please arrive at least 15 minutes early for your appointment and bring your medical history information and a list of any medications that you are taking so that you can complete these forms and your appointment is not delayed.

If preferred, you can complete your medical history prior to your appointment using our online patient portal (see instructions on page 6), which will save significant time.

Please bring your dental insurance card (if you have one) to your first appointment, along with two forms of identification, including one with a photo ID:

- Driver's License
- Non-driver's ID (issued by the Dept. of Motor Vehicles)
- Medicaid card with photo
- School or employer ID
- Passport

### **Providing Radiographs or X-Rays**

If you have had high-quality diagnostically acceptable radiographs taken within the last 3 years, and can provide them in electronic format, your costs may be reduced. You can ask your provider to email them to us at [radiology.dental@touro.edu](mailto:radiology.dental@touro.edu) or bring them with you on disk or flash drive to your first appointment.

## **Follow-Up Care**

At the end of the appointment, we will assign you to a dental team that is most suited to serve your dental needs and you will be given a follow-up appointment. At that appointment, you will have a comprehensive evaluation and discuss the details and fees of a treatment plan that are specific for you. The care that is provided by dental students will be closely supervised by experienced dental faculty to ensure that you receive the highest quality care.

## **Emergency Treatment**

For new patients with a dental emergency including, but not limited to, broken restoration/fillings, bleeding, swelling, oral infection, and or/trauma, urgent care will be provided during normal business hours with no appointment necessary.

Emergency treatment is available on a first come, first served basis, Monday through Thursday, 9:00am – 5:00pm and on Friday from 9:00am – 3:00pm. The emergency evaluation fee is \$75.00 plus additional fees for necessary radiographs and treatment.

For patients of record, after-hour emergencies are handled by the doctor on call. If you have an emergency, please call our main number at 914-594-2700 and follow the recorded directions to reach our answering service. The answering service will locate the doctor on call and he/she will contact you as soon as possible to assess your emergency care needs. If you think you have a life-threatening emergency, please call 911 or go to the nearest hospital emergency center.



# Patient Portal Instructions

Our Patient Portal provides secure access for patients to view, download, and transmit their personal and medical information. You will save valuable time by completing required information before arriving for your appointment.

## The Patient Portal allows you to:

- Review and verify personal, medical and insurance information
- Verify upcoming appointments
- View past appointments
- Keep your whole family's information all in one place
- Download your medical history to share with other healthcare providers

## How to Register

You must be an existing patient of Touro Dental Health to use the Patient Portal. After scheduling your first appointment, you will be able to self-register by following these steps:

To login to the Patient Portal:

1. Go to **<https://dentalhealthportal.touro.edu/PatientAccess/>**
2. Register by clicking on **Register for Access**
3. Enter your birth date, first name and the e-mail address you used when making your appointment
4. Click on **Send Email**
5. You will receive an email with a link to **Create Account** and will be prompted to set a password

## Using the Portal

1. Once you are logged in, click on the **Home** button to access the main menu of options
2. Navigate through the tabs at the top of the page to view and update your personal and medical information, insurance coverage, and confirm upcoming appointments
3. Complete as much information as possible to avoid delays during your appointment

Please call us at 914-594-2700 if you need help logging in or using the patient portal.

## **Questions or Concerns**

Patients have the right to express concerns or complaints without fear of reprisal and with the assurance that the presentation of a complaint will not compromise the quality of their care or future access to care.

Patients who have concerns about any aspect of the dental care or treatment they have received at the Touro Dental Health should discuss their concerns with the supervisor of the program where dental care was rendered. Patients may also register that concern either in person, by telephone, or in writing to the Touro Dental Health Office of Patient Relations.

Director of Clinical Operations  
Touro College of Dental Medicine  
Touro Dental Health  
19 Skyline Drive  
Hawthorne, NY 10532  
914-594-2700

# Patient Responsibilities

## Financial Responsibility

You are financially responsible for the treatment provided by Touro Dental Health. You will receive a treatment plan with fees according to our current fee schedule. Because of our focus on education, we are able to offer our services at affordable fees which are lower than the cost of comparable procedures at most private practices.

Your treatment and associated fees will be discussed with you prior to the start of the treatment. Payment is required at the time of your appointment – we accept checks, cash, all major credit cards, Medicaid and most dental insurance. You will be responsible for any balance that might not be covered by your insurance carrier.

## Dental Insurance

Touro Dental Health accepts cash, checks, all major credit cards, most insurance plans (subject to deductibles and co-payments, and certain guidelines) and New York State Medicaid. It is each patient's responsibility to know his/ her dental insurance benefits, please check with your employer or insurance plan with questions about coverage.

## Dental Medical Records

The dental medical record, radiographic images, photographs, videos, models and other diagnostic aids relating to your treatment are the property of Touro Dental Health. You have the right to inspect such materials and to request a copy of your dental medical records and radiographic images. A small fee is required for copying these items. You may also request to have your dental radiographic images sent to another health care provider by signing a Release of Information form. Touro Dental Health complies with requirements of the Health Insurance Portability and Accountability Act (HIPAA). You will receive separate information, forms and consents in that regard. In addition, your dental medical record may be used for instructional and educational purposes.

## Prescription Databases

Some insurance companies, pharmacies, or other entities send information on current and past patient prescriptions to electronic databases. Touro Dental Health's electronic record system may, from time to time, query available prescription databases and receive such information concerning your past prescriptions. These queries may not identify all your current and past prescriptions. Therefore, it is important for you to keep an up-to-date list and to provide this information to your provider.

## **Keeping Your Appointments**

It is important for you to be on time for your appointments. If you find that you are unable to keep an appointment, you must notify the student dentist or the patient coordinator for the practice at least 48 hours in advance. A total of three cancellations without 48-hour notice, or more than two missed appointments, or repeated unsuccessful attempts to arrange an appointment, may result in the discontinuance of further treatment.

## **Patient Code of Conduct**

You have a responsibility to be considerate and respectful of the rights of other patients and Touro Dental Health personnel and for respecting the property of other persons at Touro Dental Health.

- Indiscriminate use of obscene language, inappropriate behavior, or gestures while at Touro College of Dental Medicine may result in dismissal.
- Patients who are under or perceived to be under the influence of alcohol or any other substance will not be treated at that time and can be grounds for dismissal.
- Inappropriate behavior or comments of a cultural, ethnic or sexual nature will not be tolerated and will result in you being discharged as a patient.
- Patients are not permitted to transfer from one student to another based on race, creed, color, gender, national or ethnic origin, sexual preference or disability.

## Patient's Bill of Rights

The doctors and staff of Touro College of Dental Medicine recognize that while you are a patient here you have the right, consistent with law, to:

1. Understanding and use these rights. If for any reason you do not understand or you need help, we will provide assistance, including an interpreter.
2. Receive treatment without discrimination as to race, color, religion, sex, national origin, disability, sexual orientation, gender identity, source of payment or age.
3. Receive considerate and respectful care in a clean and safe environment free of unnecessary restraints.
4. Receive emergency care if needed.
5. Be informed of the name and position of the persons who will be in charge of your care and names and position of administrative staff and refuse their treatment, examination on or observation.
6. Receive complete information about your dental diagnosis, treatment, and prognosis.
7. Receive all the information that you need to give informed consent including possible risks and benefits for any proposed procedure or treatment.
8. Refuse treatment and be told what effect this may have on your health.
9. Refuse to take part in research. In deciding whether or not to participate, you have the right to a full explanation.
10. Privacy and confidentiality of all information and records regarding your care.
11. Participate in all decisions regarding your treatment.
12. Review your dental record without charge. Obtain a copy of your dental record for which we can charge a reasonable fee. You cannot be denied a copy solely because you cannot afford to pay.
13. Receive an itemized bill and explanation of all charges.
14. Complain without fear of reprisals about the care and services you are receiving and have the provider respond to you, and if you request it, a written response. If you are not satisfied with the response, you can complain your concerns to the Faculty or to the Director of Clinical Operations at 914-594-2700 and if you are still not satisfied, you may contact the New York State Health Department and you will be provided their telephone number.

## Consents and Policies

**Below, are copies of the consents and policies that you will be asked to sign electronically. Please review the information carefully and keep this information for your records.**

### Patient Guide

I acknowledge that I was provided with a copy of the Guide to Patient Services.

I have read, understand, and agree to abide by the aforementioned appointment policy and payment policy. I acknowledge that I was provided with a copy of the Touro Dental Health Notice of Privacy Practices. I acknowledge that I reviewed and understand the consent to dental treatment. You will be asked to provide an electronic signature in acknowledgment of the above.

### Patients Who Are Minors

A parent or legal guardian must accompany patients who are minors at every visit. This accompanying adult is responsible for payment of the account or must provide complete and accurate information about the guarantor on the insurance that will be billed.

### Appointment Policy

We take great pride in the quality of care that we deliver. In an effort to maintain this high-level of care, we have instituted appointment guidelines regarding cancellation /no-show/lateness. Compliance with this policy will allow patients to receive treatment in a timely and efficient manner, promoting optimal care and oral health.

1. Once appointments are scheduled, patients are expected to attend each and every session at the appointed time.
2. If you are going to be more than 15 minutes late for your scheduled appointment, please call to let us know so that we may notify your doctor.
3. All cancellations must be communicated to the department 48 hours in advance or 72 hours in advance of a surgical and/or sedation procedure.
4. If you cancel or fail to show for 3 consecutive visits, you may be discharged from being provided care at the college.
5. If you fail to contact us in 2 weeks after being sent a “warning letter”, you will be discharged from the College of Dental Medicine.
6. The College reserves the right not to reschedule patients who have been discharged for failing to show for prior scheduled appointments.

Touro Dental Health reserves the right to discontinue dental treatment at its sole discretion. Should treatment be terminated, any remaining credit balance for services not yet provided will be refunded. If you have a complaint that cannot be resolved at the student or faculty level, please contact the business office 914-594-2700.

We appreciate your understanding and cooperation with this policy.

I have read, understand and agree to abide by the aforementioned policy.

### **Prescription Databases**

Some insurance companies, pharmacies, or other entities send information on current and past patient prescriptions to electronic databases. Touro Dental Health's electronic record system may, from time to time, query available prescription databases and receive such information concerning your past prescriptions. These queries may not identify all your current and past prescriptions. Therefore, it is important for you to keep an up-to-date list and to provide this information to your provider. By signing the consent, you give Touro Dental Health Permission to access these electronic data bases.

### **Authorization for Release of Information**

I hereby authorize and consent Touro College of Dental Medicine to release to government agencies, insurance carriers, or others who are financially liable for the dental care, all information needed to substantiate payment for such care, and permits others who are representatives thereof to examine and make copies of all records relating to such care and treatment. However, after disclosure has been made, it cannot be revoked retroactively to cover information released prior to revocation.

### **Photo and Video**

Touro Dental Health will take or use existing photographs, audio and / or video recordings, x-rays, film, movies, or other images or recordings of patients for education and training, student portfolios, students research and presentations, etc.

### **Assignment of Benefits**

I hereby assign and set over to the above named Touro College of Dental Medicine, Inc. sufficient monies and/or benefits to which I may be entitled from government agency insurance carrier or others who are financially liable for my dental, medical care to cover the costs of the care and treatment rendered to myself or my dependent in said practice. I understand that I am responsible for charges not covered by my insurance plan.

## **Email/Text Message Communications**

As a patient, you agree that we may communicate with you by electronic means such as (but not limited to) email or text message. We will make every attempt to Communicate over the Internet using a secure (encrypted) email/text messaging system. However, you must assume that there is no assurance of confidentiality when communicating via email /text messages. Touro Dental Health will not communicate health information that is specially protected under state and federal law (e.g., HIV/AIDS, substance abuse, mental health information) via email/texts.

### **Please Read This Information Carefully**

Email communications are a two-way communication. However, responses and replies to emails sent to or received by either you or your health care provider may be hours or days apart. This means that there could be a delay in receiving treatment for an acute condition.

Email messages on your computer, laptop, or other device have inherent privacy risks especially when your email access is provided through your employer or when access to your email messages is not password protected.

Email is sent at the touch of a button. Once sent, an email message cannot be recalled or cancelled. Errors in transmission, regardless of the sender's caution, can occur. You can also help minimize this risk by using only the email address that you provide to our practice/ program/ provider.

In order to forward or to process and respond to your email, individuals at Touro Dental Health other than your health care provider may read your email message. Your email message is not a private communication between you and your treating provider. Neither you nor the person reading your email can see the facial expressions or gestures or hear the voice of the sender. Email can be misinterpreted.

At your health care provider's discretion, your email message and any and all responses to them may become part of your medical record.



**I understand and agree to the following:**

- I certify the email address provided on this request is accurate, and that I accept full responsibility for messages sent to or from this address.
- I have received a copy of the IMPORTANT INFORMATION ABOUT PATIENT EMAIL form, and I have read and understand it.
- I understand and acknowledge that communications over the Internet and/or using the email system may not be encrypted and may not be secure; that there is no assurance of confidentiality of information when communicated via email.
- I understand that all email communications may be forwarded to other providers for purposes of providing treatment to me.
- I agree to hold Touro Dental Health and individuals associated with it harmless from any and all claims and liabilities arising from or related to this request to communicate via email.

If you have an urgent or an emergency, you should not rely solely on provider / patient email to request assistance or to describe the urgent or emergency. Instead, you should act as though provider / patient email is not available to you and seek medical attention.

I understand this consent will remain in force until I revoke it in writing.

By electronically signing these consents, listed above, I hereby state that I have read and understand these consent forms, and that I have been given the opportunity to ask questions, I might have, and that all my questions have been answered in a satisfactory manner.

# Notice of Privacy Practices

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

## Your Rights

You have the right to:

- Get a copy of your paper or electronic medical record
- Correct your paper or electronic medical record
- Request confidential communication
- Ask us to limit the information we share
- Get a list of those with whom we've shared your information
- Get a copy of this privacy notice
- Choose someone to act for you
- File a complaint if you believe your privacy rights have been violated

## Your Choices

You have some choices in the way that we use and share information as we:

- Tell family and friends about your condition
- Provide disaster relief
- Include you in a hospital directory
- Provide mental health care
- Market our services and sell your information
- Raise funds

## Our Uses and Disclosures

We may use and share your information as we:

- Treat you
- Run our organization
- Bill for your services
- Help with public health and safety issues
- Do research
- Comply with the law
- Respond to organ and tissue donation requests
- Work with a medical examiner or funeral director
- Address workers' compensation, law enforcement, and other government requests
- Respond to lawsuits and legal actions

A complete copy of this notice is available upon request, in our office, and on our web site.

## CONNECT WITH US!

Please connect with us online for news, events and health information. Share your stories and reviews so we can continue to improve services for our patients and help others find affordable dental care.



[facebook.com/tourodental](https://facebook.com/tourodental)



[twitter.com/tourodental](https://twitter.com/tourodental)



[instagram.com/tourodental](https://instagram.com/tourodental)



[tourodental.yelp.com](https://tourodental.yelp.com)



## **TOURO DENTAL HEALTH**

**PHONE:** 914.594.2700

**EMAIL:** [dentalhealth@touro.edu](mailto:dentalhealth@touro.edu)

**HOURS:** 9:00am – 5:00pm  
Monday through Thursday

9:00am – 3:00pm  
Friday (for emergencies and new patients only)

**LOCATION:** 19 Skyline Drive, 3rd Floor  
Hawthorne, NY 10532

**[DENTALHEALTH.TOURO.EDU](http://DENTALHEALTH.TOURO.EDU)**