

Welcome to the Dental Practice of Dr. William B. Langston III.

Director: Dr. William B. Langston III

Treatment/Insurance Coordinator: Shannon Bowen

Appointment Coordinator: Brandy Ringer

Dental Assistant: Meghan Hall

Office Hours: Monday- Thursday

7:30 a.m. – 4:30

Lunch 12:00 p.m. – 1:00 p.m.

Office address and Phone Contact Numbers:

Long Creek Dental

3635 N. Beltline Rd, Ste 160

Sunnyvale, Tx 75182

972-270-6533

EMERGENCIES: 214-536-7332

Dr. Langston has been in practice for over 30 years. His focus over the past 20 years has been bio compatible dentistry and the functional orthopedics of the head and neck and related pain disorders. His treatment philosophy includes splint therapy, physical medicine modalities, manipulative medicine, ligament strengthening, nutritional support, toxicology, and orthodontic and restorative finalization. Dr. Langston is committed to continuing his education to provide state-of-the-art treatment for his patients.

Dr. Langston's staff understands that patients require a warm and caring environment, and each staff member strives to minimize the stress associated with returning each patient to maximum health.

Brandy answers the phone during office hours. After hours and during lunch you may leave a message on our recorder, or if you have an emergency, please page Dr. Langston using the number listed above. Patients are encouraged to call during office hours with any questions regarding their treatment or problem. Brandy can answer many of your questions. For those questions, which Dr. Langston needs to be consulted, Brandy will relay your questions and Dr. Langston will return your call as soon as possible. Please understand, for extended calls, there may be a consultation fee.

*******PLEASE READ CAREFULLY*******

Appointment Policy: Our patients understand the importance of providing at least 24 hours notice on all cancellations. Our office is closed on Fridays, therefore any cancellations or reschedules for Monday appointments must be made by 11:00 am on THURSDAY. It is important that we adhere to this policy. Therefore, if you do need to cancel, please give us advanced notice so that we may give that appointment time to another patient whom may need it. A charge of \$50.00 per half hour will be assessed, with less than 24 hours notice. Fees may be waived in case of emergency. Patients cannot be rescheduled after 3 missed appointments without proper notice. Also, if patients are late, we cannot guarantee we will be able to complete all the work that was scheduled. We will make every effort to honor our commitment to be ready for your appointment, and request that you do the same. Cancellations left overnight for an appointment for the following day, and cancellation's after 11:00 am on Thursday for a Monday appointment will NOT be considered 24 hours notice. Appointment cards will be given to remind you of your upcoming appointment and it is your responsibility to keep up with the appointment. If for any reason we need to reschedule your appointment (due to any reason), we will also give you the courtesy of letting you know in advance.

*******The first visit is always to assess your problem, to determine what your problem is, and to decide which treatment will be appropriate for you.**

Fees and payments: Insurance must be verified prior to the first appointment, otherwise payment is expected for the visit. The responsibility of the account remains the patients, as the insurance contract is between the patient and the insurance carrier. If an insurance claim is unpaid for 60 days, you will be notified of this and you may wish to contact the insurance company. After and additional 30days, you will be required to pay for the balance for which the insurance has not reimbursed. Insurance can continue to be accepted if these rules are followed. I understand that I will be responsible for any and all collection fees if they become necessary. This will include collection agency fees or attorney's fees.

We look forward to meeting and helping you!! Thank you for choosing us to take care of your dental needs.

*******A copy of this can be given to you for your records (if needed)!**

I have read, and understand, and agree to the office policies of Dr. William Langston III.

_____ Date: _____

*******PRIOR TO ANY DENTAL APPOINTMENT THAT REQUIRES ANESTHESIA, DO NOT TAKE VITAMIN C, AS IT AFFECTS THE ABILITY TO GET APPROPRIATE NUMBNESS!*******