



3107 Lone Tree Way , Suite C  
Antioch, CA, 94509-4959  
Phone - (925) 754-2662

### **COMPLIMENTARY RECORDS WAIVER OR ACCEPTANCE**

The purpose of your records appointment is solely for your evaluation and treatment planning. It is not intended to serve as diagnostics for any medical conditions, and it will not be read for said purposes. If you wish to use the CT scan for diagnostics, you may have it interpreted by our recommended radiologist for \$150 or of your choosing and at your expense.

The complementary records including all but not limited to digital xrays, measurements, and photographs as part of your consultation is for the purpose of LEGACY DENTAL STUDIO consultation only, and if you wish to receive a copy of that there's a \$300 fee associated.

Please choose and sign whether you would like a copy of your CT scan after your appointment today.

WAVIER I have elected to have the free CT scan taken and will not take a copy home with me today.

- ☐ Yes  
☐ No

ACCEPTANCE I have elected to have the CT scan taken and elect to take a copy home with me today for a fee of \$300.

- ☐ Yes  
☐ No

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**Patient Signature**