

Richard M. Freeman, D.D.S

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Due to the limited space, the policy of this office is **patient only** past the front desk. After the examination is over Dr. Freeman, or one of the dental assistants, will call you back to an area to explain the treatments needed. We ask that everyone please stay in the waiting area until called back by the doctor or the assistant.

Signature is required before treatment.

Thank you,

Dr. Freeman, D.D.S.

Signature: _____ Date: _____