

AAC Orthodontics

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Welcome to our office. We hope you are staying healthy and safe during these continued challenging times. Due to the pandemic we are keeping the waiting area closed except for the patient. The clinic assistant will call the patient from the waiting area when a dental chair becomes available.

Please complete this form with the best address, phone number and email address to provide updates to you. As we continue to follow safety protocol to protect the patients and staff we unfortunately will not be able to discuss services and treatments face to face. If you have any questions for the assistant or Doctor today, please write that in the section below as well.

Included is a release form that **MUST** be signed to treat the patient. The assistant will collect the papers when we call the patient back to the clinic. The patient will return to the vehicle when today's appointment is completed. Do not leave the parking lot until we call you to schedule the next appointment.

Thank you again for your patience and understanding during these new times.

PATIENT NAME: _____

DATE OF BIRTH: _____

RESPONSIBLE PARTY: _____

ADDRESS: _____

PHONE : _____

EMAIL: _____

QUESTIONS OR CONCERNS: _____

312 E. US 30
SCHERERVILLE, IN 46375
(219) 322-8008
Fax (219) 322-7779

8165 CALUMET AVENUE
MUNSTER, IN 46321
(219) 836-0888
Fax (219) 836-8855

2262 W. MORTHLAND DRIVE
(US HIGHWAY 30)
VALPARAISO, IN 46385
(219) 531-0544