

West Seattle Orthodontics Heidi K. Horwitz, DDS

WHAT'S MOST IMPORTANT TO YOU?

We consider your satisfaction to be of utmost importance, and this starts by personalizing your orthodontic experience. Please review the treatment aspects below and rank your preferences with 1(lowest concern) – 3 (highest concern).

- **AESTHETICS:** I would prefer it if people don't notice I'm in orthodontic treatment.
- **COLORS:** I want to have fun displaying different colors (ie on holidays, for sports teams, etc).
- **COMFORT:** I want the highest degree of comfort possible during treatment.
- **LENGTH OF TIME IN ORTHODONTIC TREATMENT:** I want to have a beautiful smile as quickly as possible.
- **VISIT FREQUENCY:** I want to come to the orthodontist as few times as possible.
- **APPOINTMENT LENGTH:** I want to sit in the chair for short periods during adjustment appointments.
- **SCHEDULE:** I'd like appointments to accommodate my own schedule (before or after school / work).
- **PUNCTUALITY:** I want to be seen on time for adjustment appointments.
- **TREATMENT COST:** I want the lowest possible treatment cost.
- **FINANCING:** I need the most flexible payment options possible.
- **OTHER:** _____