## **PRE-VIDEO CALL QUESTIONANAIRE**

PATIENT NAME:

PATIENT D.O.B:

	PATIENT INITIAL	PARENT INITIAL
CONSENT TO VIDEO CONFERENCE WITH DR PHILIP		
BARTON REGARDING ORTHODONTIC TREATMENT.		
CHANGES TO THE PATIENT'S MEDICAL HISTORY SINCE		
THE BEGINNING OF 2020? (IF NONE WRITE 'NONE')		
YOU WILL BE WITHIN THE UK AT THE TIME OF THE		
VIDEO CONFERENCE.		
IF THE PATIENT IS UNDER THE AGE OF 16 YEARS OF AGE,		
A PARENT/GUARDIAN WILL BE PRESENT THROUGH THE		
VIDEO CONFERENCE AND THE CHILD GIVES PERMISSION		
FOR THE PARENT TO BE PRESENT AND		
HEAR/CONTRIBUTE AS NECESSARY TO THE		
CONSULTATION.		
PLEASE PROVIDE A SUITABLE TELEPHONE NUMBER		
WHICH CAN BE USED SHOULD THE VIDEO CONFERENCE		
FAIL FOR ANY REASON.		
THE MEETINGS WILL BE UNDERTAKEN USING A		
TELEMEDICINE PLATFORM, PLEASE NOTE YOU DO NOT		
NEED TO DOWNLOAD ANY SOFTWARE TO USE THIS		
PLATFORM AS IT IS UNDERTAKEN USING AN E-MAIL		
LINK WHICH WILL BE SENT TO YOU WHEN A SUITABLE		
VIDEO CONSULTATION HAS BEEN ARRANGED FOR		
YOU.		
THE VIDEO CALL WILL TAKE PLACE WITHIN A		
COMMUNAL ROOM OF THE HOUSE (NOT A BEDROOM)		
IDEALLY WHERE YOU CAN NOT BE OVERHEARD FOR		
CONFIDENTIALITY REASONS		

We ask that you, your parent/guardian, please complete the spreadsheet above, scan it and e-mail it back to us (if you do not have this facility, please return by post).

We will then contact you to arrange a video conference slot with Dr Philip Barton.

You will receive an e-mail containing a link which you will need to click on 5 minutes before your consultation.

You will be placed in the 'virtual waiting room' and Dr Philip Barton will start the video conference as soon as he becomes free (within 10 minutes).

We are aware that this makes the process more difficult and would like to thank you for your patience and understanding at this difficult time.