



## Consent Form

I wish to have:

- Extraction or Surgery
- Fillings
- Root Canal Therapy
- Crown and/or Bridge
- Periodontal Cleaning / Scaling
- Removable Dentures/Partials

Indicated on my examination and I consent to performing whatever procedure deemed necessary or advisable to both diagnose and treat the planned operation(s).

I agree to the use of local anesthesia, sedation and analgesia depending upon the judgement of the dentist involved in my case. I am aware and have been advised of the probable complications of the diagnosed procedures, anesthesia and drugs.

I understand that occasionally there are complications following dental treatment, or the administration of anesthesia or the prescription of drugs which can result in a wide variety of complications specific to those procedures or medications being used or performed and cross reactions with other medications or physical conditions already present.

I believe the health history which I have reviewed and signed to be accurate and complete and all information provided which may be of importance to my health or dental condition.

### **Extraction or Surgery**

The most common complications to extraction or oral surgery are pain, swelling, nausea, vomiting, bruises, bleeding, tingling or numbness of the lip, gum, face or tongue due to nerve damage, post-operative infection, sinus complication or damage to other teeth, one, T.M.J., or neck and unfavorable reactions to drugs, anesthesia.

### **Fillings/Sealants**

The most common complication to fillings are pain, sensitivity to temperature change or foods, fracture of tooth structure, nerve damage, damage to other teeth, occlusal (bite) discrepancies, T.M.J complications, reactions to drugs or anesthesia.

### **Crown and Bridges**

The most common complications are pain, sensitivity to temperature changes to foods, tooth nerve damage, fracture of tooth structure, damage to other teeth, occlusal (bite) discrepancies, T.M.J complications, periodontal complications, tooth loss, esthetic limitations, reactions to drugs or anesthesia.

### **Root Canal Therapy**

The most common complications are pain, swelling, infection, tooth fracture, numbness of lips, face or tongue, damage to crowns, bridges or teeth, teeth loss, diagnostic inconsistency, reactions to drugs or anesthesia.

I understand teeth treated with root canal therapy even under the best circumstances can fail. Root canal teeth must be normally restored with crowns, posts or bridges.

### **Periodontal Cleaning or Scaling**

The most common complications are pain, bleeding, tissue (gum) laceration, sensitivity to temperature or foods, swelling, ulceration (infections), tooth fracture, crown fracture, breakage of fillings. Reactions to fluoride treatment can be allergic reaction, vomiting, nausea.

### **Removable Denture/Partials**

The most common complications to fabrication or relining of removable appliances are pain ulcerations, swelling, temporary pronunciation adaptations, inadequate fit or appearance, occlusal (bite) discrepancies, T.M.J. syndrome, dry and cracked lips, gagging.

Patient / Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Doctor Signature: \_\_\_\_\_

Date: \_\_\_\_\_