

Informed consent for fillings

Types of filling material:

composite resin (tooth colored)

amalgam ("silver filling"), gold or porcelain inlay, or

Benefit

aesthetic silver amalgam or gold, may entail certain risks. There is the possibility of failure to achieve the desired or expected results. I agree to assume those risks that may occur, even if care and diligence is exercised by my treating dentist in rendering this treatment. These risks include possible unsuccessful results and/or failure of the filling associated with, but not limited to, the following:

1. Sensitivity of teeth, mild or severe, may be short period of time or last for much longer periods of time. If such sensitivity is persistent or lasts for an extended period of time, I will notify the dentist because this can be a sign of more serious problems.

2. Risk of fracture

Inherent in the placement or replacement of any restoration, is the possibility of the creation of small fracture lines in the tooth structure. Sometimes these fractures are not apparent at the time of removal of the tooth structure and/or the previous fillings and placement or replacement, but they can appear at a later time.

3. Necessity for root canal therapy

When fillings are placed or replaced, the preparation of the teeth often requires the removal of tooth structures adequate to ensure that the diseased or otherwise compromised tooth structure provides sound tooth structure for placement of the restoration. At times, this may lead to exposure or trauma to underlying pulp tissue. Should the pulp not heal, which often is exhibited by extreme sensitivity or possible abscess, root canal treatment or extraction may be required.

4. Injury to the nerves

There is a possibility of injury to the nerves of the lips, jaws, teeth, tongue or other oral or facial tissues from any dental treatment, particularly those involving the administration of local anesthetics. The resulting numbness that can occur is usually temporary, but in rare instances it could be permanent.

5. Aesthetics or appearance

When a composite filling is placed, effort will be made to closely approximate the appearance of natural tooth color. However, because many factors affect the shades of teeth, it may not be possible to exactly match the tooth coloration. Also, the shade of the composite fillings can change over time because of a variety of factors including mouth fluids, foods, smoking, etc. The dentist has no control over these factors.

6. Breakage, dislodgement or bond failure

Because of extreme masticatory (chewing) pressures or other traumatic forces, it is possible for composite resin fillings or aesthetic restorations bonded with composite resins, to be dislodged or fractured. The resin-enamel bond can fail, resulting in leakage and recurrent decay. The dentist has no control over these factors.

7. New technology and health issues

Composite resin technology continues to advance, but some materials yield disappointing results over time and some fillings may have to be replaced by better, improved materials. Some patients believe that having metal fillings replaced with composite fillings will improve their general health. This notion has not been proven scientifically and there are no promises or guarantees that the removal of silver fillings and the subsequent replacement with composite fillings will improve, alleviate or prevent any current or future health conditions.

_____ A composite filling is a dental restoration comprised of a synthetic resin material, used to restore function, integrity and morphology of missing tooth structure. The structural loss typically results from caries or external trauma.

_____ Removal of carious tooth structure with minimal amount of enamel and dentin removed as possible.

_____ I understand that the treatment of my dentition involving the placement of composite resin fillings, may create a more esthetic appearance than some of the conventional materials that have been used, such as silver amalgam or gold.

_____ Composite resin technology continues to advance, but some materials yield disappointing results over time and some fillings may have to be replaced by better, improved materials. Some

patients believe that having metal fillings replaced with composite fillings will improve their general health. This notion has not been proven scientifically and there are no promises or guarantees that the removal of silver fillings and subsequent replacement with composite fillings will improve, alleviate or prevent any current or future health conditions.

Risks of Composite Fillings, Not Limited to the Following:

- _____ I understand that often after preparation of teeth for the placement of any restoration, the prepared teeth may exhibit sensitivity. The sensitivity can be mild to severe. The sensitivity can last only for a short period of time or last for much longer periods of time. If such sensitivity is persistent or lasts for an extended period of time, I will notify the dentist because this can be a sign of more serious problems.
- _____ I understand that inherent in the placement or replacement of any restoration is the possibility of the creation of small fracture lines in the tooth structure. Sometimes these fractures are not apparent at the time of removal of the tooth structure and/or the previous fillings and placement or replacement, but they can appear at a later time.
- _____ I understand that when fillings are placed or replaced, the preparation of the teeth often requires the removal of tooth structures adequate to ensure that the diseased or otherwise compromised tooth structure provides sound tooth structure for placement of restoration. At times, this may lead to exposure or trauma to underlying pulp tissue. Should the pulp not heal, which often is exhibited by extreme sensitivity or possible abscess, root canal treatment or extraction may be required.

_____ I understand that when a composite filling is placed, effort will be made to closely approximate the appearance of natural tooth color. However, because many factors affect the shades of teeth, it may not be possible to exactly match the tooth coloration. Also, the shade of the composite fillings can change over time because of a variety of factors including mouth fluids, foods, smoking, etc, which Dr. Mark Poitras has no control over.

_____ I understand that because of extreme masticatory (chewing) pressures or other traumatic forces, it is possible for composite resin fillings or esthetic restorations bonded with composite resins, to be dislodged or fractured. The resin-enamel bond can fail, resulting in leakage and recurrent decay, which Dr. Mark Poitras has no control over.

_____ I understand that it is my responsibility to notify this office should any undue or unexpected problems occur or if I experience any problems relating to the treatment rendered or the services performed.

_____ I understand that all medications have the potential for accompanying risks, side effects, and drug interactions. Therefore, it is critical that I tell my dentist of all medications I am currently taking and any medical conditions I am have. I attest that my medical history is up to date and accurate so that my dentist may ensure my safety during the procedure.

Use of Local Anesthesia

_____ Anesthetizing agents (medications) are injected into a small area with the intent of numbing the area to receive dental treatment. They also can be injected near a nerve to act as a nerve block causing numbness to a larger area of the mouth beyond just the site of injection.

_____ Risks include but are not limited to: It is normal for the numbness to take time to wear off after treatment, usually four to six hours. This can vary depending on the type of medication used. However, in some cases, it can take longer, and in some rare cases, the numbness can be permanent if the nerve is injured. Infection, swelling, allergic reactions, discoloration, headache, tenderness at the needle site, dizziness, nausea, vomiting, and cheek, tongue, or lip biting can occur.

_____ Potential benefits: The patient remains awake and can respond to directions and questions. Pain is lessened or eliminated during the dental treatment.

_____ For ALL female patients: Because anesthetics, medications and drugs may be harmful to the unborn child and may cause birth defects or spontaneous abortion, every female must inform the provider if she could be or is pregnant. Anesthetics, medications and drugs may affect the behavior of a nursing baby. In either of these situations, the anesthesia and treatment may be postponed.

Consequences if No Treatment is Administered; Not Limited to the Following:

_____ I understand that if no treatment is performed, I may continue to experience symptoms which may increase in severity, and could lead to decay, gum disease, infections, problems with my bite, and loss of the tooth/teeth.

What is a composite filling and what are its benefits?

When a tooth has sustained a small localized area of decay or breakage, it can be repaired by a number of restorative options such as composite.

Composite is a white or tooth-colored material that when used with an adhesive agent can bond to a tooth.

What are its risks?

1. Sensitivity of Teeth: Often after preparation of teeth for the placement of any restoration, the prepared teeth may exhibit sensitivity. The sensitivity may be mild to severe. The sensitivity may last only for a short period of time or may last for much longer periods of time. If such sensitivity is persistent or lasts for much extended periods of time, I agree to notify the dentist as this may be a sign of more serious problems.

2. Risk of Fracture: Inherent in the placement or replacement of any restoration is the possibility of the creation of small fracture lines in tooth structure. Sometimes these fractures may not be apparent at the time of removal of tooth structure and/or the previous filling and placement or replacement, but may manifest at a later time.

3. Need for Root Canal: Teeth after being filled may develop a condition known as pulpitis or pulpal degeneration. This happens approximately 5% of the time. Every effort is made by the

dentist to reduce this from happening, but since teeth contain vital tissue the pulp may become irreversibly inflamed. This may even occur when the tooth had no previous history of being sensitive. Should a root canal become necessary the procedure and its fees are the responsibility of the patient.

4. Esthetics or Appearance: Effort will be made to closely approximate the natural tooth color. However, since a synthetic material is being used to replace natural enamel and dentin, there may not be an exact match. Also, over a period of time, the composite fillings, because of mouth fluids, different foods eaten, smoking, etc. may cause the shade to change. The dentist has no control over these factors.

5. Breakage, dislodgment or bond failure: Due to biting pressures or other traumatic forces, it is possible for composite resin fillings or esthetic restorations bonded with composite resins to be dislodged or fractured. The resin-enamel bond may fail, resulting in leakage and recurrent decay. The dentist has no control over these factors.

6. New Technology and Health Issues: Composite resin technology continues to advance but some materials yield disappointing results over time and some fillings may have to be replaced by better, improved materials. Some patients believe that having metal fillings replaced with composite fillings will improve their general health. This notion has not been proven scientifically and there are no promises or guarantees that the removal of silver fillings and the subsequent replacement with composite fillings will improve, alleviate, or prevent any current or future health condition.

What are my alternatives?

As stated above other filling materials exist such as amalgam, gold, or porcelain. They too have benefits and risks. As always, choosing not to have treatment is an option but does carry negative consequences such as progressing decay, weakening of tooth structure, future pain and discomfort, packing food, etc.

INFORMED CONSENT: I can read and write English and have been given the opportunity to ask any questions regarding the nature and purpose of the proposed treatment and have received answers to my satisfaction. I do voluntarily assume any and all possible risks, including the risk of substantial harm, if any, which may be associated with any phase of this treatment in hopes of obtaining the desired and/or any results from the treatment to be rendered to me. The fee(s) for these services have been explained to me and I accept them as satisfactory. By signing this form, I am freely giving my consent to authorize the doctors and staff at Cross Timbers Dental involved in rendering any services they deem necessary or advisable to treatment of my dental conditions, including the administration and/or prescribing of any anesthetic agents and/or medications.

Anesthetic: The use of local anesthetic is used for pain control during dental procedures. There are inherent risks and side effects. They include, but not limited to: swelling, bruising, soreness, elevated blood pressure or pulse, allergic reaction, and altered sensation that may lead to self-injury. Partial or complete numbness may linger after the dental appointment. In rare cases it can last for an extended time and potentially it can be permanent.

Medications: Any medications dispensed or prescribed are the patient's responsibility to understand before taking. Medication inserts are available from our office upon request. Particular attention should be given to possible allergic reactions, drug interactions with current medications and their specific side effects.

Guarantees: The practice of dentistry is not an exact science and no procedure is 100% successful. The doctors and/or staff at Cross Timbers Dental have made no guarantees of a successful outcome.

Notifications: If a patient develops a problem it is the patient's responsibility to notify the doctors and/or staff of Cross Timbers Dental. Through this notification we will be able to act on the patient's behalf. Attempts to correct a problem may occur at our office or a referral to another health care practitioner may be warranted.

Patient's name (please print) _____

Signature of patient/legal guardian _____

Date _____

At the Half Moon Dental Centre we aim to provide you with the best possible treatment that is ethically and scientifically justified as economically as possible. Below you will find not only a description of the treatment we plan to undertake for you but also the risks

associated with it.

We aim for all our treatments to be completely successful but unfortunately the nature of the oral environment dictates that, over time, most treatments will eventually fail. Also some events that we aim to control may be beyond our control.

This document in no way negates our duty of care to you. Nor is it designed to put you off treatment. It's purpose is to inform you of the most common the adverse events associated with your procedure to form part of your consent. If there is anything raised that concerns you or you do not understand please ask or inform your operator prior to undertaking the procedure. It is your right to refuse treatment at any time.

We understand that dentistry is a stressful and worrying event. If there is anything we can do to make this easier for you please ask.

The longevity of treatment undertaken is directly related to the pre existing condition of your mouth. Its success is also dependent on good oral hygiene maintenance at home and also frequent trips to the hygienist. Smoking, systemic disease, poor diet and clenching and grinding habits can also adversely effect your treatment and your other teeth and structures within the mouth.

Consent For Filling

Fillings are placed to stop the progression of decay in teeth. If left untreated decay can cause pain and infection and result in tooth loss. Decay is often seen only on x rays

SMALL

MEDIUM

LARGE.

Bite might discomfort

Temporary Dressing

Root canal treatment

1.Sensitivity of teeth. Often after preparation of teeth for the placement of any restoration, the prepared teeth may exhibit sensitivity.

The sensitivity can be mild or severe. The sensitivity can last only for a short period of time or last for much longer periods of time.

If such sensitivity is persistent or lasts for an extended period of time, I will notify the dentist because this can be a sign of more serious problems.

2.Risk of fracture. Inherent in the placement or replacement of any restoration, is the possibility of the creation of small fracture lines

in the tooth structure. Sometimes these fractures are not apparent at the time of removal of the tooth structure and/or the previous

fillings and placement or replacement, but they can appear at a later time.

3.Necessity for root canal therapy when fillings are placed or replaced, the preparation of the teeth often requires the removal of

tooth structures adequate to ensure that the diseased or otherwise compromised tooth structure provides sound tooth structure for

placement of the restoration. At times, this may lead to exposure or trauma to underlying pulp tissue.

Should the pulp not heal,

which often is exhibited by extreme sensitivity or possible abscess, root canal treatment or extraction may be required.

4.Injury to the nerves. There is a possibility of injury to the nerves of the lips, jaws, teeth, tongue or other oral or facial tissues from

any dental treatment, particularly those involving the administration of local anesthetics. The resulting numbness that can occur is

usually temporary but, in rare instances, it could be permanent.

5.Aesthetics or appearance. When a composite filling is placed, effort will be made to closely approximate the appearance of natural

tooth colour. However, because many factors affect the shades of teeth, it may not be possible to exactly match the tooth

colouration. Also, the shade of the composite fillings can change over time because of a variety of factors including mouth fluids,

foods, smoking, etc. The dentist has no control over these factors.

6. Breakage, dislodgement or bond failure. Because of extreme masticatory (chewing) pressures or other traumatic forces, it is

possible for composite resin fillings or aesthetic restorations bonded with composite resins to be dislodged or fractured. The resin/enamel

bond can fail, resulting in leakage and recurrent decay. The dentist has no control over these factors.

Types of available filling:

They are either direct (made in the dental chair) or indirect (laboratory made)

Typically the laboratory made restorations (inlays) are reserved for large filling that replace a missing cusp. They can be made from

cast gold or non precious metal or ceramic (tooth coloured). The ceramic inlays can be made from our in-house milling machine and

can be fitted on the same day. The other restorations require a dental impression and are sent away to be made. During this time

you will be required to wear a temporary filling. This may come out and become sensitive it will need replacing. Gold inlays can be

made thin and typically require less tooth tissue preparation. Ceramic inlay need to be thicker to be strong enough. This usually

results in greater tooth loss but are more cosmetically acceptable.

Direct fillings can either be made from composite (tooth coloured filling) or amalgam (mercury containing).

It is not the purpose of

this document to discuss the use of amalgam in dentistry. Amalgam is a very strong durable restoration that has been used for more

than a century but many are concerned by the mercury content. Mercury vapour is released on insertion and removal of amalgam

fillings and it is not recommended for pregnant and breastfeeding women. We also try to avoid its use in children.

It is a patient's responsibility to seek attention from the dentist should any undue or unexpected problems occur. The patient

must diligently follow any and all instructions, including the scheduling and attending all appointments.

I understand that antibiotics, analgesics, anesthetics and other medications can cause allergic reactions, resulting in redness and swelling of tissues, itching, pain, nausea and vomiting or more severe allergic reactions which, although rare, can lead to death. I have informed the doctor of any known allergies.

Certain medications may cause drowsiness and it is advisable not to drive or operate hazardous equipment when using such drugs.

3. RISKS OF DENTAL ANESTHESIA:

I understand that pain, bruising and occasional temporary or sometimes-permanent numbness in lips, cheeks, tongue or

associated facial structure can occur with local anesthetics. About 90% of these cases resolve themselves in less than 8

weeks. Although very rarely needed, a referral to a specialist for evaluation and possibly treatment may be needed if the

symptoms do not resolve.

 4. Due to the unique differences in each patient's oral cavity and oral hygiene abilities there is always a risk for relapse,

recurrence, and/or failure of restorations. I understand that it is impossible to predict if and how fast my condition would

worsen if untreated, but it is the doctor's opinion that therapy would be helpful and worsening of the condition(s) would

occur sooner without the recommended treatment.

5. CHANGES IN TREATMENT PLAN:

I understand that during the course of treatment it may be necessary to change or add procedures because of conditions discovered during treatment that were not evident during examination. I authorize my doctor to use professional judgment to provide appropriate care and understand that the fee proposed is subject to change, depending upon those unforeseen or undiagnosed conditions that may only become apparent once treatment has begun.

What is a composite filling and what are its benefits?

When a tooth has sustained a small localized area of decay or breakage, it can be repaired by a number of restorative options such as composite. Composite is a white or tooth-colored material that when used with an adhesive agent can bond to a tooth. By placing a composite filling a damaged tooth can be repaired with the intent to regain function and esthetics.

What are its risks?

1. **Retreatment or need for a nerve-treatment/crown/extraction:** After all decay has been removed and a tooth has been fixed with composite, it is the patient's responsibility to brush, floss, and limit frequent sweet and carbohydrate intake, otherwise new decay can form around the completed composite. In this case, the tooth may need to be retreated with a crown, nerve treatment/crown, or even extraction. Financial responsibility of ANY retreatment is the patient's responsibility.

2. **Sensitivity of Teeth:** Often after preparation of teeth for the placement of any restoration, the prepared teeth may exhibit sensitivity. The sensitivity may be mild to severe. The sensitivity may last only for a short period of time or may last for much longer periods of time. If such sensitivity is persistent or lasts for much extended periods of time, I agree to notify the dentist as this may be a sign of more serious problems.

3. **Need for Nerve Treatment:** Teeth after being filled may develop a condition known as pulpitis or pulpal degeneration. This happens approximately 5% of the time. Every effort is made by the dentist to reduce this from happening, but since teeth contain vital tissue the pulp may become irreversibly inflamed. This may even occur when the tooth had no previous history of being sensitive. Should a root canal become necessary the procedure and its fees are the responsibility of the patient.

4. **Risk of Fracture:** Inherent in the placement or replacement of any restoration is the possibility of the creation of small fracture lines in tooth structure. Sometimes these fractures may not be apparent at the time of removal of tooth structure and/or the previous filling and placement or replacement, but may manifest at a later time.

5. **Esthetics or Appearance:** Effort will be made to closely approximate the natural tooth color. However, since a synthetic material is being used to replace natural enamel and dentin, there may not be an exact match. Also, over a period of time, the composite fillings, because of mouth fluids, different foods eaten, etc. may cause the shade to change. The dentist has no control over these factors.

6. **Breakage, or dislodgment:** Due to biting pressures or other traumatic forces, it is possible for composite resin fillings or esthetic restorations bonded with composite resins to be dislodged or fractured.

What are my alternatives?

As stated above other filling materials exist such as crowns. They too have benefits and risks. As always, choosing not to have treatment is an option but does carry negative consequences such as progressing decay, weakening of tooth structure, future pain and discomfort, packing food, space-loss, need for more extensive treatment, etc.

I, _____ understand that it is my responsibility to notify this office should any unexpected problems occur or if any problems relating to the treatment rendered are experienced. Routine examinations by the dentist are recommended to allow ongoing assessment of the composite treated tooth.

INFORMED CONSENT: I have been given the opportunity to ask questions regarding the nature and purpose of sealants and have received answers to my satisfaction. I voluntarily undergo this treatment in hopes of achieving the desired results from the treatment rendered though no guarantees have been made regarding the outcome. I hereby assume any and all possible risks, including the risk of substantial harm, if any, which may be associated with any phase of this treatment. The fee(s) for these services have been explained to me and I accept them as satisfactory.

By signing this form, I am freely giving my consent to authorize Dr. Ericksen and/or all associates involved in rendering the services or treatment necessary to the existing dental condition, including the administration and/or prescribing of any anesthetic agents and/or medications.
