

**NAME OF PATIENT:**

**Dr. Rajiv Anand, D.D.S.**

**PURPOSE OF THIS PAPER:**

State law requires all patients to sign a consent form prior to any treatment. In order to give your consent for treatment, you should be given as much information as possible. The information should include the nature, purpose, known risks and the possibility of any alternative treatments. You should also have an opportunity to ask questions and receive satisfactory answers. We are giving you this form so that you can read it at your leisure and discuss it with us when you return to our office. Since there are several pages contained in this consent form, we ask you to sign the bottom of each page to insure that you have read each section completely. **Surgery cannot be performed unless each page is signed and given to us.**

**NATURE AND PURPOSE OF THE PROCEDURE:**

Dental implants replace a missing tooth or teeth. The implant is a machined surgical grade titanium (TiAl<sub>6</sub>V) fixture that is placed into the jawbone. It acts as an anchor for a dental prosthesis such as a crown, bridge or denture.

After an appropriate healing time, a prosthesis is attached to the implant. During the healing time, the patient generally wears a temporary prosthesis. It is important to understand that modern dental implantology is approximately a thirty year old procedure, and although it is expected that the implant will last for many years, there can be no guarantee for any specific period of time.

The doctor and his assistants may only be performing the surgical part of your treatment. The dentist whom you have chosen for your restorative dentistry will fabricate your implant prosthesis.

**ALTERNATIVES TO A DENTAL IMPLANT:**

One alternative to dental implants is to do nothing at all. Other options would be to have a conventional prosthesis, such as a bridge or full denture made depending upon your situation. The conventional bridge requires healthy adjacent teeth to support a bridge that spans the edentulous space. For denture retention, surgeons may alter or augment the upper or lower jaw by means of a vestibuloplasty (movement of muscle and cheek attachments), skin grafting, or bone grafting. There are advantages and disadvantages to each of the procedures.

**NEED FOR ADDITIONAL TREATMENT:**

In order to successfully complete implant surgery, the doctor may have to perform other procedures. Additional treatments may necessitate certain anesthetics, either local or general, as well as the performance of laboratory and radiological (X-ray) procedures. Generally, these other procedures include the administration of antibiotics and other medications for comfort. Examples of other procedures include the removal of excess or unhealthy bone or soft tissue in the area where the implants are being placed. Hard tissue or soft tissue grafts may be needed around the site to give support to the implant. Ridge splitting or surgical widening of the jawbone is often necessary prior to implant placement. Irreversible prosthetic adjustments may have to be made to your existing dental prosthesis. If you have further questions, the doctor can explain each procedure, since they will be different for each patient.

**HARD TISSUE GRAFT:**

The previous paragraph talked about the possibility of using hard tissue grafts. Although it is an uncommon procedure, we are including a paragraph specifically for it. Generally, when people lose teeth, they also lose bone. Loss of bone is one of the main problems patients have in attempting to wear a conventional dental prosthesis successfully. In the past, lost bone was replaced by grafting bone from the patient's hip or rib area. Obviously, this adds additional discomfort to the patient, and most often the bone will continue to diminish just as the jaw bone did originally.

There are now several alternatives to grafting from the hip. One such option is the use of hydroxylapatite (hereafter referred to as HA) which is a bone graft substitute. HA is a ceramic material that has a similar configuration to natural bone and has the ability to incorporate a patient's bone into its structure. It greatly decreases the resorption of bone later on. Another option is freeze-dried bovine bone that has been prepared for bone grafting. The bovine bone passes very rigid bacteriological quality control testing and has been sterilized and preserved by freeze-drying. Beta tricalcium phosphate is a synthetic bone material. Quite often we use combinations of these materials along with a patient's own bone to take advantage of the different properties of each of the elements.

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Signature (Patient or Guardian)

\_\_\_\_\_  
Date

**POSSIBILITY OF FAILURE:**

Although we know from our own experience and from that of other surgeons throughout the world that we can achieve a certain percentage of success, we cannot accurately predict for an individual patient what that chance of success will be. The reason for this is that we cannot accurately predict the bone healing capability of any particular patient. We also recognize that a patient may not take proper care of their implant. Therefore, it is not possible to guarantee an implant for any specific patient.

Furthermore, there are certain medical conditions and medications such as diabetes, excessive alcohol use, **excessive smoking**, blood diseases and anemia, immune deficiencies, steroids, and radiation therapy that may reduce the success of an implant.

**RISKS AND COMPLICATIONS ASSOCIATED WITH DENTAL IMPLANTS:**

With every type of surgery performed there can be expected post-operative sequelae. Sequelae, common to implant surgery, would include a certain amount of pain, swelling, bleeding, bruising, stiffness of facial and neck muscles, limited mouth opening, changes in bite, numbness or unusual sensations of the cheeks, mouth, or jaw which may be permanent.

The preceding list can be expected, but we also recognize that implant surgery, just as any surgery, can have complications. These include, but are not limited to, infection, tissue discoloration, alteration in taste and/or numbness, tingling, increased or decreased sensitivity of lips, tongue, chin, cheek, or teeth. There may also be an alteration in your speech. These situations may last for an indefinite period or may be permanent. Also possible, are injury to teeth if present, loss of bone, bone fractures, nasal or sinus penetration, and chronic pain

If complications occur, treatment of these complications may necessitate additional medical, dental, or surgical treatment, and it may even require an of recuperation at home or in the hospital. It may be possible that after the surgery has begun the underlying bone may be in such a condition that it would prevent placement of the implant. It is also possible that rejection of the implant would necessitate its removal at any time. Generally, if this happens it may be possible to insert another implant after a suitable healing period. If for some reason the doctor feels the implant is not reacting correctly, the implant would have to be removed, altered, or replaced as needed.

**DRUG AND ANESTHETIC COMPLICATIONS:**

Any time drugs of any sort including anesthetic drugs are used, there can be allergies or reactions that can occur and may require treatment.

**PROSTHETIC COMPLICATIONS:**

It is important for the patient to understand that there are certain limitations to the prostheses that will be constructed with your implants. A patient who has lost a tooth (or teeth) is essentially orally impaired, and although dentists can greatly help that person, it is impossible to bring their oral state back to what it originally was. Just as an artificial leg is a tremendous help to an amputee, it is still a compromise. We state this in this fashion, because it is important to understand that anything man-made can suffer mechanical failure, fracture, and could possibly require replacement as wear and attrition become significant. Cosmetic compromises may be necessary with some types of implant prosthetic treatment.

**RISKS ASSOCIATED WITH NO TREATMENT:**

Just as we try to explain both the advantages and risks of the implants, it is also important to explain what can happen if there is no implant procedure. Without treatment, the following may occur:

- progressive resorbption of the jawbone structure
- increased difficulty wearing conventional dentures
- increased loss of bony support of the face, lips and cheeks
- increased difficulty in chewing
- potential fracture of a very thin jawbone and increased pain
- numbness of the lip
- jaw joint (TMJ) problems
- drifting or tilting of the remaining teeth
- inflammation, ulcerations, abnormal tissue growth associated with ill-fitting dentures or bridges

**THE IMPORTANCE OF PATIENT COMPLIANCE:**

It is also important that the patient realize that the degree of success of any dental treatment, including implant dentistry, is directly related to the cooperation of the patient. This depends on maintaining meticulous oral hygiene especially around the implant posts. We also know that smoking, alcohol, improper dietary practices, and oral habits, such as grinding, clenching, and tongue thrusting may affect bone and gum healing, and may limit the success of the implant prosthesis. It is essential that the patient follow home care and dietary instructions, as prescribed.

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Signature (Patient or Guardian)

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It is also important that the patient return at regular intervals for inspection of the mouth and to maintain long-term follow-up care. The same standard should be used just as one would for their natural teeth.

The patient should report immediately any evidence of pain, swelling, or inflammation around the implants, or any problems with the attachments, or change in bite. A reasonable office fee is usually charged for these visits, just as they would be for any other dental problem.

**AUTHORIZATION OF THE USE OF DENTAL RECORDS:**

During the course of treatment photographs, radiographs, video and other information are often taken in order to evaluate the healing process. Unless a patient has an objection, the doctors use these photographs, radiographs and video for educational and promotional purposes. It is also common for visiting doctors to observe the treatment of our patients. If you have any questions about this, please feel free to discuss it with us.

**CONSENT FOR SURGERY:**

**DIAGNOSIS:**

**TREATMENT:**

This paper is comprehensive, but we have learned over many years that the well-informed patient is our best patient and we want to be sure you have every opportunity to ask questions and receive answers. Do not sign this consent form if you have any questions to ask.

I hereby authorize and direct the doctor and his assistants, to perform the above named treatment upon me (or the person identified below as the patient for whom I am empowered to consent) to insert an implant[s] in my upper and/or lower jaw.

I have read and understand the three pages in this consent form. I also state that I have been given an opportunity to ask questions and that my questions have been answered to my complete satisfaction.

Signature: \_\_\_\_\_  
(Patient or Guardian)

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