

Informed Consent: Dental Implant

Procedure: Dental implants fit into sites prepared in the jawbone. Only titanium has been demonstrated to attach directly to bone (osseointegration). This system has undergone the scrutiny of scientific and clinical research for more than 30 years. The American Dental Association approves this system. An incision is made on the jaw ridge adjacent to the areas to receive implants. Bone grafting may be necessary to ensure successful integration. The implants are inserted into the bone, and the tissues are sutured. If an implant fails, it is simply removed, much like a tooth extraction.

Maintenance: The degree of long-term success depends largely on the patient's health and continued maintenance efforts. Implants have to be maintained daily with good home hygiene, just like natural teeth. Doctors and staff may give specific prescriptions and instructions. A long-term program of implant maintenance is mandatory for success.

Complications: Complications may result from implant surgery, drugs, and anesthesia. The various outward reactions to anesthesia may include pain, infection, swelling, discoloration, and tingling or numbness of the lip, tongue, chin, cheeks, or teeth. The exact duration of these complications cannot be determined, and they may be irreversible. Other possibilities are injury to teeth, bone fractures, and nasal and sinus penetrations. Since each patient's healing process varies, a delay in healing or allergic reaction to drugs or medications used may occur. As smoking decreases circulation, it may account for failure of the implant. If the connection between the implant and the bone fails, further complications may arise. This may make it necessary to remove the implant. Infections involving the bone (osteomyelitis) are rare but may require extensive treatment, including, but not limited to, hospitalization and considerable additional expense. Since the practice of dentistry is not an exact science, there is no assurance that the implant system and/or the artificial appliances will be completely successful.

Drugs, Medications, and Sedation: Drugs, medications, or anesthesia/sedation can cause allergic and other reactions. Examples include, but are not limited to, swelling, redness, itching, vomiting, diarrhea, and numbness or tingling of the lip, gum, or tongue (which in rare cases may be permanent), as well as anaphylactic shock (in rare cases). Since drugs, medications, or anesthesia/sedation also may cause drowsiness and impair coordination or awareness, patients should not operate a motor vehicle or hazardous device before achieving full recovery. I have informed the dentist of all drugs and medications I am taking or have taken within the last 30 days, as well as those that have been prescribed within the last six months but not taken, and of all allergies and sensitivities of which I am aware. I have been informed and understand that failure to take drugs or medications as prescribed by my dentist may result in continued or aggravated infection and pain, and resistance to effective treatment. I also understand that antibiotics can reduce the effectiveness of birth control pills.

I have discussed treatment alternatives, risks, outcomes, and costs with my dentist and have had all of my questions answered before making a decision. I understand that dentistry is not an exact science and that there are no guaranteed results. Unless otherwise provided by law, I understand that I am responsible for payment of all dental fees not paid in full by any insurance or other applicable coverage. Having had adequate time to reflect upon the alternatives, I consent to the treatment, subject to changes in the treatment plan.

Patient Signature

Date

Tooth Number(s)

Witness

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