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## INFORMED CONSENT

Excellent orthodontic results are generally achieved by patients who understand their treatment goals and know what they must do to fully participate in their treatment. Orthodontic treatment, like any form of health care, has some risks and limitations. The risks are seldom severe enough to offset the advantages of treatment, but they should be considered when you decide to start orthodontic treatment. In our practice, we recommend treatment only when the expected benefits far outweigh the risks.

### RISK FACTORS ARISING FROM NORMAL BIOLOGICAL PROCESSES

#### PERIODONTAL DISEASE

The health of the bones and gums which support the teeth may be affected by orthodontic tooth movement if a condition of gum disease already exists, and in some rare cases where the condition does not appear to exist. In general, orthodontic treatment lessens the possibility of tooth loss and gum infection by improving the bite.

#### ROOT RESORPTION

In some patients the roots of the teeth may be shortened during orthodontic treatment. This root resorption is usually not of significant consequence, but on occasion it may affect the longevity of the teeth involved.

#### PRE-EXISTING NON-VITAL OR TRAUMATIZED TEETH

Sometimes a tooth may have been traumatized by a blow or have large fillings that cause damage to the nerve. In these cases, orthodontic treatment may aggravate the need for root canal treatment.

#### TEMPORO-MANDIBULAR JOINT (TMJ)

The TMJ is the sliding hinge connecting the upper and lower jaws. If a TMJ disorder exists, orthodontic treatment may help remove the dental causes of the problem, but not non-dental causes. In some cases, TMJ problems first become evident during or after orthodontic treatment; symptoms include joint pain, headaches, or ear problems.

#### INDIVIDUAL GROWTH PATTERNS

Occasionally, unexpected or abnormal changes in the growth of the jaws or in the shape and size of the teeth may limit our ability to achieve the desired results. If growth becomes disproportionate, the bite may change and additional treatment may be needed. In some cases of growth disharmony, surgery may be advised to achieve optimal results.

### OTHER CONSIDERATIONS

#### ORAL SURGERY

Sometimes, to achieve optimal results, oral surgery or tooth removal is necessary in conjunction with orthodontic treatment, especially to correct severe jaw imbalances. There are extremely rare life threatening risks and potential disabilities involved with oral surgery. You must discuss this with the oral surgeon before making a decision about surgery.

#### APPLIANCES AND HEADGEAR

Sometimes orthodontic appliances may be accidentally swallowed or aspirated, or may irritate or damage the oral tissue. Headgear, if improperly handled, may cause injury to the face or eyes. The possibility of mishap is rare if the patient carefully follows instructions for wear and care of appliances.

#### ALLERGIES

Allergies to medicine and orthodontic materials may occur during treatment. If you are aware of these allergies, they can be avoided, but if they are unknown to you it is impossible to predict reactions.

Known allergies: \_\_\_\_\_

### RISK FACTORS UNDER THE PATIENT'S CONTROL

#### POOR DIET OR ORAL HYGIENE

Tooth decay, gum disease and permanent decalcification marks on the teeth can occur if patients do not brush and floss frequently and properly. The same problems can occur without braces, but the risk is greater with braces, particularly if foods with high sugar contents are eaten.

#### COMPLETION TIME

The total time required to complete treatment may exceed our estimate. This can be due to excessive or deficient bone growth, but is often attributable to the patient's participation in treatment. Factors that can lengthen treatment and affect the quality of the results include: missed or rescheduled appointments, broken appliances, not following food guidelines, improper wear and care of appliances, and inadequate oral hygiene.

#### CHANGES IN THE BITE AFTER TREATMENT

When the braces are removed, teeth may have a tendency to change their positions. Tooth movement is usually minor and faithful wearing of retainers as prescribed reduces this tendency. Oral habits, such as mouth breathing, tongue thrusting, grinding of the teeth and finger sucking, or the eruption of wisdom teeth, can also cause the bite to change after treatment.

### ADDITIONAL CONCERNS IN THIS CASE

#### TREATMENT FEES

- Cover all aspects of the proposed treatment done in our office except:
  - Replacement of lost or broken, fixed or removable appliances.
  - Extended treatment beyond original time estimated due to non-cooperation.
  - Procedures associated with the treatment but done in other offices (cleaning, extractions, fillings, surgery, cosmetic bonding, etc.)
- Include three years of retention supervision.
- Should a patient transfer prior to completion of treatment, a fee adjustment will be made reflecting work completed. Adjustments take into account appointments kept/on time, cooperation, breakage, etc.

### ACKNOWLEDGEMENT AND INFORMED CONSENT TO ORTHODONTIC TREATMENT

*I have read, understood and have had all my questions answered with regard to the above described risks and limitations of orthodontic treatment. If applicable, I have also been alerted to the higher risk in some aspects of this case, which I have initialed.*

*I consent to the orthodontic treatment of:*

Patient's name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Relationship to patient \_\_\_\_\_

Witnessed by \_\_\_\_\_

