

INFORMED CONSENT FOR DENTAL IMPLANT SURGERY

Diagnosis: After a careful oral examination, radiographic evaluation and study of my dental condition, my periodontist has advised me that my missing tooth/teeth may be replaced with artificial teeth supported by one or more dental implants.

Recommended Treatment: I understand that dental implant surgery involves screwing an artificial titanium tooth root into my jawbone in order to hold a replacement tooth, bridge or denture. This procedure has two phases, the surgical phase (placing the implants and later exposing them) followed by the prosthetic phase (getting the replacement tooth/teeth attached to the implant). This office only does the surgical phase. My general dentist or prosthodontist would do the prosthetic phase.

Surgical Phase of Treatment: I understand that a local anesthetic will be administered as part of the dental implant surgery. Other forms of sedation, such as nitrous oxide (laughing gas) or sedative pills (valium) may be used. During the procedure, the following treatment will be performed:

- Gum tissue will be opened and pulled away to expose the jawbone.
- A hole(s) will be drilled into the jawbone and the titanium dental implant(s) will be placed.
- Bone regenerative material (grafting) may be placed **(1)** to build more bone around the implant screw if there is an inadequate width of bone due to bone loss or **(2)** to add bone to the upper jaw in the area of the molars or premolars to make it taller in order for an implant(s) to be placed (sinus lift).
- Sterile, medical grade calcium sulfate may be added as a good source of extra calcium content for obtaining a successful bone graft and a covering may be placed over the graft (i.e. resorbable sterile collagen wafer) to keep the bone material in place.
- The gum will then be sutured over or around the dental implant(s) so it will be held tightly in place during the healing phase and a periodontal dressing may be placed.

Healing will be allowed to proceed for approximately of 4-6 months. I understand that dentures usually cannot be worn during the first 1-2 weeks of the healing phase so as not to impede healing. After the required healing time period, the dental implant will need to be exposed. A local anesthetic will be given and the following treatment will be performed:

- Overlying gum tissue will be opened and pulled away.
- The stability of the implant will be verified.
- If the implant appears satisfactory, then an attachment (abutment) will be connected to the implant.

If there are no complications, plans and procedures to create an implant prosthetic appliance or artificial crown(s) may begin with my general dentist or prosthodontist.

Prosthetic Phase of Treatment: I understand that at this point I will be referred back to my general dentist or prosthodontist. This phase is just as important as the surgical phase for the long-term success of my oral reconstruction. During this phase, an implant prosthetic device will be attached to the implant. A person trained in the prosthetic protocol for dental implants should perform this procedure.

Expected benefits: The purpose of dental implants is to allow me to have more functional artificial teeth and/or improved appearance. The implants provide support, anchorage, and retention for artificial teeth, crowns, bridgework, or dentures.

Principal Risks and Complications: I understand that some patients do not respond successfully to dental implants, and in such cases, the implant must be removed. Implant surgery may not be successful in providing artificial teeth. Since each patient's condition is unique, long-term success may not occur.

Complications may result from the dental implant surgery involving the gums and jawbone, or from drugs or anesthetics. These complications include, but are not limited to the following: post-surgical infection, bleeding, swelling, pain; facial bruising; transient (on rare occasion permanent) numbness of the jaw, lip, tongue, chin or gum; jaw joint pain or muscle spasm; cracking or bruising of the corners of the mouth; restricted ability to open the mouth for several days or weeks; impact on speech; allergic reactions; perforation of the drill hole into the sinus if an upper implant is being placed; accidental swallowing of foreign matter; transient (on rare occasion permanent) increased tooth looseness; and tooth sensitivity to hot, cold, sweet or acidic foods. The exact duration of any complication cannot be determined, and may be irreversible.

I further understand that if during surgery, clinical conditions turn out to be unfavorable for the use of the implant system or prevent the placement of implants, my periodontist will make a professional judgment on the management of the situation. The procedure may need to be cancelled or may involve supplemental bone grafts or other types of grafts to build up the ridge of my jaw to allow placement, gum closure, and security of my implants.

Also, the design and structure of the artificial tooth (teeth) can be a substantial factor in the success or failure of the implant. It is always possible to have a successful, solid implant and the connection between the implant and the gum and/or bone may fail right away, or even months or years later, necessitating the removal of the implant.

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