

Consent for Orthodontic Treatment

CONSENT for orthodontic treatment for _____

While benefits of ideally aligned teeth, a healthy bite relationship and pleasing smile are widely appreciated, orthodontics remains an elective procedure. It, like any other treatment of the body, has inherent risks. These seldom prevent treatment, but should be considered when making the decision to undergo treatment.

DECALCIFICATION is the discoloration appearing as white lines or spots on teeth. It should not occur if adequate oral hygiene is maintained but is a risk with neglect or oral hygiene and ingestion of high sugar foods and beverages,

TOOTH DECAY, like decalcification, is a risk in the presence of poor oral hygiene, but should not occur with adequate oral hygiene and healthy, low sugar diet.

RELAPSE Teeth have a tendency to rebound to their original position treatment. This is called relapse. Very severe problems have a higher tendency to relapse and the most common area of relapse is the lower front teeth. After band removal, a positioner or retainers are placed to minimize relapse. Full cooperation in wearing these appliances is vital. We will make our correction to the highest standards and in some cases over-correct in order to accommodate the rebound tendencies. When retention is discontinued, some relapse is still possible. We recommend wearing retainers at night indefinitely to maintain a good result.

PERIODONTAL PROBLEMS are also preventable with adequate oral hygiene, but are possible with inadequate oral hygiene. They include inflammation and/or enlargement of gums, recession of gums and recession of bony support.

DEVITALIZATION is loss of vitality of the pulp or nerve of a tooth. The possibility of this is remote and is treatable with a root canal.

ROOT RESORPTION is shortening of root ends. When it does occur, it is usually minimal and causes no significant problem. Trauma, impacted teeth, endocrine disorders and idiopathic factors can also cause root resorption.

TEMPOROMANDIBULAR JOINT SYMPTOMS include cracking, popping, and discomfort of jaw joints, as well as soreness of the muscles that operate the lower jaw. Malocclusion (bad bite) is one possible cause of these symptoms. Even though one of the main goals in orthodontic treatment is to achieve a healthy bite relationship, correction occurs slowly over the course of treatment. As such, TMJ symptoms are possible during treatment. Other common causes of TMJ symptoms are clenching and grinding of teeth, postural imbalance, hormonal imbalances, and trauma.

IRRITATION OF GUMS, CHEEKS, OR LIPS by braces is possible, especially if a blow to the mouth is received. It is possible that parts of orthodontic appliances may be accidentally swallowed or aspirated.

HEADGEAR, if improperly handled, may cause injury to the face or eyes. Although our headgears are equipped with a safety release system, they should not be worn during any "roughhousing" activity.

CERAMIC (CLEAR) BRACKETS are more aesthetic but present added risks. These include bracket fracture which could add treatment time, enamel attrition (significant wear of opposing teeth), and chipping of enamel during the process of braces removal. Although we have taken steps to prevent these problems from happening, patients should consider these risks in making the decision to utilize ceramic brackets.

ORAL SURGERY, TOOTH REMOVAL OR ORTHOGNATHIC SURGERY is sometimes necessary in conjunction with orthodontic treatment. Risks of these procedures should be discussed with your general dentist or oral surgeon before making your decision to proceed.

ANATOMIC VARIABILITY OF TEETH AND GUMS may necessitate additional treatment by your family dentist or periodontist in order to achieve the best result. Examples of this are cosmetic bonding, crown and bridge restorative dental care, and periodontal treatment.

DISPROPORTIONATE GROWTH OF THE JAWS, beyond the orthodontist's ability to control, may limit the ability to achieve the desired result. Since unfavorable change in the functional bite relationship could result, additional treatment, or an altered treatment plan could be recommended. The chance of this happening, fortunately, is quite low.

GENERAL MEDICAL PROBLEMS can affect orthodontic treatment. We request that you inform us of changes in medical health status.

It should be noted the unnecessarily prolonged treatment increases the chances of having several of the above conditions. The most common causes of prolonged treatment of insufficient wearing of elastics or headgear, damaged appliances, and missed appointments. These causes are under "patient control". Reduced rate of biologic response, not under patient control, is another cause.

It should also be noted that even though we may be very optimistic that treatment objectives will be met, there is no guarantee that the desired result by proposed orthodontic treatment will be achieved.

I have reviewed the information above and do consent to orthodontic treatment.

Date _____ x _____