



Informed Consent for Crowns & Bridges

Diagnosis: Crowns are often needed when a large cavity threatens the ongoing health and longevity of a tooth or to restore a tooth after root canal therapy.

Description of Procedure: In order to replace decayed or otherwise traumatized teeth the existing tooth or teeth are modified so that crowns and/or bridges may be placed upon them. In preparation of teeth, anesthetics may be needed.

Expected Benefits of Procedure: Crowns restore a tooth's shape, size, strength, and improve its appearance.

Risks Related to Procedure:

Risks include, but are not limited to, complications resulting from the use of dental instruments, drugs, sedation, medicines, analgesics (pain killers), anesthetics, and injections. swelling; sensitivity; bleeding; pain; infection; numbness and tingling sensation in the lip, tongue, chin, gums, cheeks, and teeth, which is transient (temporary) but on infrequent occasions may be permanent; reactions to injections; changes to occlusion (biting); jaw muscle cramps and spasms; temporomandibular (jaw) joint difficulty; Trismus (restrictive jaw opening) which may last a few days or longer, loosening of teeth; referred pain to ear, neck, and head; vomiting; allergic reactions; delayed healing; sinus perforations; and treatment failure.

Sensitivity of Teeth - After the preparation of the teeth for reception of either crowns or bridges, teeth may exhibit mild or severe sensitivity. This sensitivity may last for a short period of time or for much longer periods. If it persists, notify Dental TLC immediately as this sensitivity may be from some other source.

Crowned and Bridge Abutment Teeth May Require Root Canal Treatments - Crowned teeth may develop pulpitis or pulpal degeneration. The tooth or teeth may have been traumatized from an accident, deep decay, extensive preparation, or other causes. It is often necessary to do root canal treatment on these teeth. If teeth remain too sensitive for long periods of time following crowning, root canal treatment may be necessary. Infrequently, the tooth (teeth) may abscess or otherwise not heal which may require root canal treatment, root surgery, or possibly extraction. This may occur even if there was not previous discomfort.

Breakage - Crowns and bridges may chip and break - Many factors could contribute to this situation such as chewing excessively hard materials, changes in biting forces, and traumatic blows to the mouth. Unobservable cracks may develop in crowns from these causes, but the crowns/bridges may not actually break until chewing soft foods or possibly for no apparent reason. Breakage or chipping seldom occurs due to defective materials or construction unless it



occurs soon after prosthesis.

Aesthetics or Appearance - Patients will be given the opportunity to observe the appearance of any crowns or bridges in their mouth prior to final cementation. If satisfactory, patients will acknowledge the same in writing, by the patient's signature or signature of legal guardian at the bottom of this form.

Changes to the Bite - A crown or bridge may alter the way teeth fit together and may result in soreness of the jaw. This may require adjusting patient's bite by altering the biting surface of the crown, veneer or adjacent teeth.

Recementations - After a crown is cemented there is a possibility that in the future the crown may come off. If a crown comes off the crown should be evaluated immediately. If a crown is not recemented immediately the crown may no longer fit and may need to be redone.

Alternatives to Procedure: (1) No treatment; (2) waiting for definite development of symptoms; (3) tooth extraction. Risks involved in alternative treatments may include pain, swelling, loss of teeth, and infection.

Necessary Follow-Up Care and Self-Care: I understand that it is important for me to continue to see my regular dentist. I understand that failure to follow daily care instructions or report for follow-up appointments as needed may lead to further risks or complications, including the risk of crown and bridge failure.

No Warranty or Guarantee: I hereby acknowledge that no guarantee, warranty, or assurance has been given to me that the proposed Crown(s) and/or Bridge(s) will be successful in treating my condition or that they will last for a specific period of time. There is a risk of failure, relapse, additional treatment, or worsening of my present condition, including the possible loss of certain teeth, despite the best of care.

Supplemental Records and Their Use: I consent to the use of photography, video recording, and/or X-rays of my oral structures for both the above procedure(s) and educational use in lectures or publications, provided my identity is not revealed in compliance with HIPAA.

I, _____, understand the risks involved with Crowns and Bridges and I release Dental TLC and any Dental TLC employees, agents or independent contractors from any liability related to Crown Implants.

Signature _____

Date: _____