

Patient Name: _____

B.P.: _____

Date: _____

Pulse: _____

Informed Consent for Dental Implants

The Implant Procedure

The initial surgical phase consists of the surgical reflection of the gum tissue followed by precision drilling of holes into the underlying jawbone which depth and width are slightly smaller than the roots of your natural teeth. These holes are immediately filled with implants (metal cylindrical posts). When indicated, a regenerative procedure might be utilized in which a freeze-dried bone graft is placed and the site is then covered with a regenerative membrane. All surgery is performed under local anesthesia and may be supplemented with sedative drugs or I.V. Conscious Sedation (if requested by the patient or if deemed necessary). During the first two (2) weeks following the initial surgery, no dentures or partial dentures should be worn over the surgical sites without consent of the surgeon.

In the second surgical procedure, the implant is evaluated for proper healing, and a post is placed into the implant, which extends through the gum tissue into the mouth. Additionally, a minor surgical correction of tissue may be necessary to modify any tissue overgrowths or discrepancies. In the final prosthetic phase, a metal sleeve is threaded into the previously surgically imbedded implant, which is then attached to the overlying denture, crown, or bridge.

Risks

Risks within implant procedures include, but are not limited to, the following:

1. Temporary or permanent nerve injury resulting in altered sensations or numbness of the lips, chin, tongue, teeth, and/or gums.
2. Damage to adjacent teeth and/or dental restorations.
3. Soreness at injection sites and/or along veins; and discoloration of the injection sites, face, and/or jaws.
4. Opening of the sinus requiring additional treatment.
5. Jaw fracture, muscle spasms, and/or limited opening of jaws for several days or weeks.
6. Small root fragments remaining in the jaw due to an increased possibility of surgical complications.
7. Jaw joint (TMJ) tenderness, soreness, pain, or locking, which may be temporary or permanent.

Alternative Treatments to Implants

1. If no treatment is elected to replace existing dentures or missing teeth, the non-treatment risk includes maintenance of the existing full or partial denture with relines or remakes every three-to-five years for shifting of teeth, or as otherwise may be necessary due to the slow but progressive resorption of the supporting jawbone.
2. Construction of new full or partial dentures or bridges, which may provide better fit and function than your present situation.
3. Surgical treatment to provide a better base or foundation for a new denture.

Patient Consent

I, _____ (patient name) have been fully informed of the nature of implants and implant surgery, therapeutic risks, and treatment alternatives to dental implants, and I hereby consent to their surgical placement in my jaws. I agree to maintain these implants as prescribed by my dentist.

Signature of Patient or Other Legally-Responsible Person

Date

Patient's Name (Please Print)