

Date:

Your Name

Address

City, State Zip



Informed consent and Concerns with Your Surgery

Our office has prepared this list of instructions to minimize the complications and to make the healing process as successful and comfortable as possible. The treatment plan listed below list the specific dental terminology that has been explained to you in normal terms. As always, anything that is unclear to you or that you would like explained in greater detail feel free to ask the staff or one of the doctors. We want you to be as comfortable as possible.

At this time the proposed surgical plan is:

Sedation: For some patients we may provide sedation. This may be by 3 different methods: Nitrous Oxide (laughing Gas), oral (by mouth), or I.V. **Special considerations need to be used for the latter 2, oral and I.V.**

- You **must** have someone drive you to and from your dental appointment; you must not drive or operate anything for at least 12 hours. For some patients, this time may be even longer.
- Do not eat or drink for at least 6 hours before, you may have one cup of clear liquid.

Treatment may be provided with conscious sedation to relax the patient and make the procedures go smoother via I.V. (in the vein of the hand or arm) or oral (by mouth). This presents certain risks, benefits and alternatives and the need for a driver. Complications are rare (less than 1 in 40,000), but may consist of decrease of breathing, nausea, feeling “hung over,” and even death. Benefits of conscious sedation include a more pleasant experience and a reduction in the risks for a heart attack or a stroke by decreasing the stress in the patient. Alternatives include the use of an anesthesiologist, or treatment without sedation.

Periodontal (Gum) surgery, and tooth extraction, will often have some of the normal post surgical, results: (discomfort, swelling, and tenderness). Rarely (less than 1 out of 100) do complications occur including, but not limited to, infection, severe discomfort, nerve damage (resulting in permanent pain or numbness), prolonged bleeding, and tooth sensitivity (hot and cold). As with any surgical procedure there are the possibilities of life threatening consequences, even death but these are extremely remote.

I understand that the removal of teeth (extractions), if indicated, can be accomplished at this appointment and may be in my best interest for the continuity of care and may reduce the surgical appointments. I understand that extractions are not the specialty of a Periodontist, but these doctors have had extensive training in these procedures. I understand that I can be referred out for this/these extraction(s) to an Oral Surgeon but have elected not to for continuity of care, and reduction of surgical appointments.

Sometimes donated or transplanted tissues are used to replace tissue of your own. These may be derived from animals such as a cow or pig, but also human bone/tissue may be used.

We may use BMP (Bone Morphogenetic Protein) to help rebuild the bone which is a newer product but well proven.

These products fall under the regulation of the FDA guidelines and are considered to be safe. This has been discussed in detail, please alert the doctor or staff if you have any objections.

Medications: Take your medications as directed unless you are experiencing problems such as rashes, itching, and diarrhea. Let the office know if any of these side effects happen. **If itching or a rash occurs, stop the medications immediately.**

Discomfort and Pain: We usually prescribe 2 different medications one narcotic and one non-narcotic. We recommend that you take the non-narcotic (Ibuprofen, Naproxen Sodium, Ultram) for the first 2 days to reduce the swelling. These medications should not impair your judgment or ability to drive. We recommend that the narcotic medications (Vicodin, Percocet) only be taken when you do not need to drive and be active. You should not drive if you do not feel up to it or at least for 12 hours after having sedation.

Swelling and Ice: Ice will help minimize the swelling if used during the first day for 20 min on and 20 off. After the first 2 days it may be beneficial to use warm moist heat such as a towel warmed with warm water. If you notice any increase in pain or swelling contact the office immediately. If you feel that the swelling is making it difficult to breathe or swallow, and you are unable to contact anyone at the office, seek immediate medical attention at an emergency room. This occurrence is extremely rare but could happen.

Cleaning the area: Brush the areas with the mouth rinse 2 times a day after the first 12 hours, if we did not prescribe a mouth rinse for you just water will suffice. **Be very gentle** with the area and if you experience any pain, use less pressure. You **do not want to displace any of the tissue** in the area. Bone graft particles may be lost due to the over packing of the area, this is not uncommon.

Periodontal Dressing or “Pack”: We sometimes put a “Band-aid” or pink putty over the surgical area. If it comes loose or falls off do not try to replace it. The area will usually be fine and will heal normally.

Diet: Try to eat on the other side from the surgical area. Do not eat crunchy or hard foods, and try to avoid spicy foods as they may cause burning.

Bleeding: Sometimes there may be bleeding or oozing that comes from the surgical area or from the donor (roof of the mouth) area. Often a small amount of blood will mix with saliva or spit and look like a lot of blood. Do not be alarmed. If you notice a significant amount of bleeding (active bleeding or pulsating blood) follow these steps:

- Apply moist gauze to the area and apply direct pressure for 10 min by the clock. If the area is an extraction site you can bite together over the gauze.
- If that does not work apply a moistened tea bag to the area for 5 minutes
- If the area does not improve contact the doctor as soon as possible at one of the numbers listed below. If you are unable to contact one of the doctors and you feel that the bleeding is significant seek immediate medical attention.

Soft Tissue Grafting- We perform two types of grafts in our office. The first 2 days are the most important part in the healing phase. It is **absolutely critical** that any movement does not disturb the area. Try to speak as little as possible during the first 24 hours. Do not eat

anything that will create a “sheer” force on the area such as big bites with carrots or apples. Try not to chew in the grafted area. Do not eat hard or spicy foods that will aggravate the donor area.

Bone Grafting- We will often place a bone grafting material in the area. This material will sometimes become dislodged and go into the mouth presenting as a sandy material. This is not uncommon and is just usually the excessive material from the area. We often may use a membrane or barrier to cover the area and promote the bone graft to heal. If some of the area becomes exposed it is not an issue. If you feel there is an infection, call the office as soon as possible.

Dental Implants- Some dental implants are covered by gum tissue and some are left exposed. Rinse the area with the prescription mouthwash the day after surgery. After 3 days you can begin brushing the area if comfort permits. You should have normal feeling in the area as soon as the anesthetic wears off, if you do not please contact the office.

Sinus Grafting (Augmentation) - Continue to take medications especially the antibiotic (Amoxicillin, Clindamycin, etc.) as prescribed. Sometimes a decongestant such as Sudaphed may also be used during the healing phase.

- Try not to blow your nose as it may disrupt the graft.
- Sleeping slightly elevated with 2-3 pillows or in a recliner should decrease the congestion, which is not uncommon after this procedure.
- Nosebleeds do happen, but are not common, and you should not be alarmed unless it continues for more than 10 minutes. Your drainage should be clear but may have a small amount of color to it.
- Sometimes graft materials may come out which feel like sand, and are white; this is not cause for alarm.
- If you have any uncommon drainage, swelling, temperature (greater than 99° F), or feel that you may have an infection, please contact the office immediately.

No Guarantees or Warranties: If the case requires further procedures to bring the case to completion additional fees will be incurred and this will be the patient’s responsibility.

If you have any questions, any one of the doctors or members of the staff can answer your questions for you. We want to provide the *best service* for you in our office. The office phone number is Fresno 559-229-6557, Merced 209-383-2196.

Emergency Contact Phone numbers: Phone #'s will be provided

Dr. Dennis Nishimine	Cell	Home
Dr. Dee Nishimine	Cell	
Dr. Sophia Tseng	Cell	

All questions have been addressed and answered.
This has been presented by:

Your Name

Signature:

