

Date

Your Name

Address

City, State Zip



Informed consent and Concerns with Your Implant 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 some one 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 a one cup of a clear liquid

The treatment goal is the placement of dental implant(s) total. The final crowns or bridge, and or denture to be completed by your general dentist.

Bone grafting is necessary for the ideal placement of your dental implants and may increase the likelihood of complications.

Distraction osteogenesis will be utilized to achieve the desired results for my case. I understand that this is a relatively new area of treatment and can provide the best results.

Sinus augmentation is indicated and may have complications such as congestion, discharge of graft particles, and infection, increasing the need for follow-up and possible referral.

Computerized x-ray (CT scan) may be used for your case as indicated by the doctor. The benefits of this procedure are that it provides a more accurate image to better place the dental implant(s). It most likely will show areas importance such as nerves that must be avoided for a successful case. If I have chosen not to have this procedure due to any reason I accept the fact that this may produce less than ideal results.

Benefits of implant therapy are restoring your dentition i.e. teeth and jaws, improving your appearance, and the rehabilitation to the most natural state possible. Dental implants according to current research, will replace natural teeth, improve function, improve speech, and provide service for a great deal of time (up to 35 years), reduce bone loss, and improve convenience in lifestyle.

Dental implant treatment is a surgical procedure, which presents with certain risks. Most likely you will experience minor discomfort and swelling that should subside in less than a week. Potential complications that are **very unlikely**, but are not limited to, include excessive pain,

swelling, bruising, nerve damage, damage to adjacent teeth, and the possibility of death as highly unlikely event. Some of these things such as nerve damage may produce temporary numbness (parasthesia), pain or burning (dysthesia) or these conditions may be permanent. **In rare** circumstances some complications may require referral and possibly treatment by other doctors for which the patient may be responsible. Dental implant therapy does not work all of the time, and failures do occur, smoking roughly doubles the failure rate. For a patient without systemic disease the success rate can be expected to be between 85-98%.

I understand a patient with complicating factors such as **smoking** or history of radiation treatment that this complicates my dental implant therapy and the ability for them to heal properly to the jawbone. I also understand that this adds additional complications to the case and it is impossible for the doctors to foresee all complications. Therefore it is reasonable to accept a higher chance of failure and no warranties whatsoever. Any additional fees are to be accepted by the patient

Drugs that are classified as Bisphosphonates have shown an increased risk for development of necrosis of the jaw which can be extremely serious. At this time, with the studies noted, it appears that the risks is very remote, less than 1 in 100,000 of developing a severe infection, bone loss or death.

Alternatives to dental implant therapy include, but are not limited to, no treatment whatsoever, seeking additional opinion, treatment with fixed bridges, removable partial dentures, and complete dentures (false teeth). I as a patient understand that these alternatives may not be the best treatments for myself and these options have been explained to my satisfaction.

I understand that it is **unethical** to provide a warranty to this treatment and that the area may need to be retreated. The practitioner may retreat the area at their discretion of the area fails. The area will be retreated at a nominal fee, usually just the cost of the surgical setup. The surgical set up fee will be \$2000.00 or less or to be determined. Our office attempts to use products from implant manufactures that warrant their products and provide replacement and financial assistance for the patient. Some will provide for the replacement of the restoration.

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.

The fee agreed upon is for the cost of the implant, surgery, and materials and does not cover the cost of the restorative or crown fee (white part above the gumline). I understand that that fee is to be determined by myself, the patient, and my general dentist.

At the time of this revision, July, 11, 2006 the State of California has required that for all placements of "permanent" dental restorations, that the patient be informed of the material being placed and the safety of these materials. At this time, nothing is available for dental implants, but a survey of the current literature and information reveal no adverse side effects, allergies or toxicities.

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. 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, and 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 breath 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 prescribed 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.

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.

Bruising: It is not uncommon for bruising to occur in these areas after surgery.

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 559-229-6557.

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 case has been presented by:

Signature: