

LAGUNA CREEK ORTHODONTICS

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INFORMED CONSENT

Good orthodontic results usually can be achieved with informed and cooperative patients. Thus, the following information is routinely supplied to anyone considering orthodontic treatment in our office. While recognizing the benefits of a pleasing smile and healthy teeth, you should also be aware that orthodontic treatment, like any treatment of the body, has some inherent risks and limitations. We feel these are not enough to contraindicate treatment, but should be considered in making the decision to wear orthodontic appliances. You must make your own decision whether you want to go ahead with treatment. Please feel free to ask any questions at any time.

Some of the more common items we want you to know about are listed below.

- _____ 1. Decalcification (permanent markings), decay, or gum disease can occur if patients do not brush their teeth properly and thoroughly during the treatment period. Excellent oral hygiene and plaque removal is a must. Sugars and between meal snacks should be minimal. It is imperative that the patient see their general dentist every 6 months while undergoing orthodontic treatment unless otherwise specified.
- _____ 2. Teeth have a tendency to rebound to their original position after orthodontic treatment. This is called relapse. Very severe problems have a higher tendency to relapse. Once the braces are removed, retainers will be placed to minimize relapse. Full cooperation in wearing these appliances is vital. We will make our correction and in many cases overcorrect in order to accommodate the rebound tendencies. When retention is discontinued some relapse is still possible.
- _____ 3. In some cases, the root ends of the teeth become shortened. This is called root resorption. Trauma, cuts, impaction, endocrine disorders and even unknown reasons can cause root resorption. Tooth movement, such as in orthodontic treatment can also cause root resorption. In the event of gum disease the root resorption could reduce the longevity of affected teeth. However, under healthy circumstances the possibility of shortened roots is not a disadvantage.
- _____ 4. There is also a risk that problems may occur in the temporomandibular joints (TMJ). Although this is rare, it is a possibility. On the other hand, orthodontic treatment for better tooth alignment or bite correction can prevent or lessen what otherwise • would show up later in life as TMJ pain or can improve non-related cases of existing TMJ pain, but not in all cases. Tension appears to play a role in the frequency and severity of joint pain.
- _____ 5. A non-vital or dead tooth is a possibility. A tooth that is diseased or that has been traumatized from a deep filling or even a minor blow can die over a long period of time with or without orthodontic treatment. An undetected non-vital tooth may flare up during orthodontic movement, requiring treatment, possibly a root canal, to maintain it.
- _____ 6. Occasionally, a person who has grown normally and in average proportions may not continue to do so. If growth becomes disproportionate, the jaw relation can be affected in the original treatment objectives and may have to be compromised. Skeletal growth disharmony is a biological process beyond the dentist's control. Sometimes, surgical intervention is necessary to correct a skeletal problem.
- _____ 7. The total time for treatment can be delayed beyond our estimate. Lack of facial growth, poor elastic wear, or headgear cooperation, broken appliances and missed appointments are all important factors which could lengthen treatment time and affect the quality of the result. Failure to maintain the proper level of oral hygiene, which will cause permanent damage to the teeth and gums, will result in a premature removal of the orthodontic appliance leaving a compromised result.
- _____ 8. Headgear instructions must be followed carefully. A headgear that is pulled outward while the elastic force is attached can snap back and cause severe injury to the face or eyes. Be sure to release the elastic force before removing the headgear from the teeth.
- _____ 9. In the case of early or Phase One treatment, a second phase of treatment (full braces) may / will be necessary.
- _____ 10. So, please make every effort to do it right. This takes cooperation from everyone — myself, my staff, your family, and most of all, the patient. Thank you for your cooperation in this matter.

I have read and understand the above and consent to treatment.

Date _____

Patient Name _____

Patient Signature _____ (if patient is over 18 years old)

Parent Signature _____ (if patient is under 18 years old)

Signature of Witness _____