

## Informed Consent Form for General Dental Procedures

You the patient have the right to accept or refuse dental treatment recommended by your dentist. Before consenting to treatment, you should carefully consider the anticipated benefits and commonly known risks of the recommended procedure, alternative treatments, or the option of not receiving treatment.

Do not consent to treatment unless and until you discuss the possible benefits, risks, and complications with your dentist and all of your questions are answered. By consenting to treatment, you acknowledge your willingness to accept the known risks and complications, no matter how small the probability of their occurrence. It is very important that you provide your dentist with accurate information before, during and after treatment. It is equally important that you follow your dentist's advice and recommendations regarding medication, pre- and post-treatment instructions, referral to other dentists or specialists, and return to scheduled appointments. If you don't follow your dentist's advice, you can increase the chances of a poor outcome.

Certain heart conditions can create a risk of serious or fatal complications. If you (or a minor patient) have a heart condition or heart murmur, let your dentist know right away so they can consult with your doctor if necessary. The patient is an important part of the treatment team. In addition to following the Instructions given to you by this office, it is important that you report any problems or complications you experience so that you can be seen by your dentist.

If you are a woman taking birth control medication, you should consider the fact that antibiotics can make oral contraceptives less effective. Check with your doctor before relying on birth control medications if your dentist prescribes them or if you are taking antibiotics. As with all surgeries, there are commonly known risks and potential complications associated with dental treatment. No one can guarantee the success of the recommended treatment, or that you will not experience a complication or less than optimal result. Although many of these complications are rare, they can and do occur occasionally. Some of the more commonly known risks and complications of treatment include, but are not limited to, the following:

1. Pain, swelling, and discomfort after treatment.
2. Infection that needs medication, follow-up procedure, or other treatment.
3. Temporary or, rarely, permanent numbness, pain, tingling, or altered sensation of the lips, face, chin, gums, and tongue along with possible loss of taste.
4. Damage to adjacent teeth, restorations, or gums.
5. Possible deterioration of your condition that may result in tooth loss.
6. The need for replacement of restorations, implants or other appliances in the future.
7. An altered bite that needs adjustment.
8. Possible injury to the jaw joint and related structures requiring follow-up care and treatment, or consultation by a dental specialist.
9. A piece of bone from the tip of the root or a piece of dental instrument may remain in your body, and may need to be removed later if symptoms develop.
10. Jaw Fracture
11. If the upper teeth are treated, there is the possibility of a sinus infection or an opening between the mouth and sinus cavity leading to infection or the need for further treatment.
12. Allergic reaction to the anesthetic or medication
13. Need for follow-up treatment, including surgery.
14. Bone Loss or Recession

The purpose of this form is to provide you with an overview of possible risks and complications. Please do not sign this form or agree to treatment until you have read, understood and agreed to each paragraph listed above. Discuss the possible benefits, risks, and complications of the recommended treatment with your dentist. Make sure your dentist has addressed all of your concerns to your satisfaction before starting treatment.

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**Signature:** Patient/Parent/Legal Guardian

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**Date**

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**Witness Signature**

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**Patient Name (Print)**