

PATIENT CARE LETTER & CONSENT FORM

Dear Patient ,

If you have received this letter through the email please print it and sign the sections required. You may either return it by post or bring it with you on the day of treatment. This letter provides information that should enable you to make an informed choice about your implant treatment.

You are encouraged to ask any questions, and have the answers to your satisfaction **before** you give permission for the treatment to be carried out. Having read and understood this information and discussed any queries you might have, if you wish to proceed with implant surgery at a training centre, you are required to sign a consent form.

Below is described your proposed dental implant treatment and the formal terms and conditions of the clinic. You should take as much time as you wish to make the decision in relation to signing the following consent form. Although there is a large amount of information contained in this letter it is important that you should understand and read it carefully. Please keep this letter in a safe place as the treatment described is long-term and it can often be difficult to remember the exact details several months later.

During the course of the implant treatment it is important that you keep the dentist informed of any changes to your general medical condition and of any other additional treatment you may be receiving from a doctor or dentist. Failure to keep the dentist informed may adversely affect or delay your treatment. It is also important that you keep your appointments and do not miss any stages, as this could adversely affect treatment and delay placement of the new teeth. If an appointment is missed or cancelled with less than 48 hours notice an additional fee will be charged.

WHY ARE IMPLANTS NEEDED?

Once teeth are lost, the bone in which they are embedded gradually disappears because it is no longer required to support the teeth. The teeth and lost bone are usually replaced by removable dentures or fixed bridges to restore appearance, speech and mastication. As with all manmade substitutes for nature's living tissues, there are drawbacks to artificial appliances. Dentures reduce masticatory efficiency and can suffer from poor retention. On the other hand, bridges involve cutting away healthy teeth in order to provide support.

An alternative method of tooth replacement is to insert implants into the jawbone to support the false tooth or teeth. Such implants may become firmly attached or integrated with the bone and act in a similar manner to a tooth root. If an implant is placed immediately or soon after a tooth is extracted, jawbone is preserved and its further loss prevented. For this reason it is best not to delay the decision to place implants, as bone will be lost with time which can make the placement of implants more difficult. However, even after considerable bone loss has occurred, it may still be possible to place an implant although additional bone grafting techniques may be required.

THE PROCEDURE AND ASSOCIATED RISKS

1. The condition of the jaws will be assessed for suitability and the treatment will be planned using X-ray films, photographs and models of the teeth. It may be necessary to take a Jaw Scan (CT) type X-ray to check the amount and position of the available bone. The final decision whether or not to proceed with implant placement will be made at the time of surgery and will be determined by the quality and quantity of the jaw bone.
2. An important nerve runs in the lower jaw that supplies sensation to the lower lip and skin of the

chin. Obviously the X-ray or CT scan is important in determining the position of this nerve avoiding the slight possibility of injury which could result in altered sensation when placing implants in the lower jaw.

3. In the upper jaw it is important to ascertain the size and position of the air sinuses and nasal cavities prior to implant insertion. Occasionally the implants may have to be placed slightly into the sinus or nasal cavity. Usually this is not noticeable but there may be a slight nasal discharge with a small amount of temporary bleeding. In rare situations the implant may fall into these cavities and have to be removed.
4. If the implants are being placed between existing teeth then there is always the slight risk that the tooth, its roots or supporting bone may be damaged during the placement procedure. This is more likely to occur if the teeth are very close together or their roots badly angled reducing the amount of space required to accommodate the implant. If this is the case it will have been identified during your assessment and discussed with you prior to implant treatment. Occasionally the teeth either side of an implant may feel slightly different or have an altered sensation.

METHODS OF IMPLANT PLACEMENT

Implants may be inserted in one of two ways:

1. Immediate insertion is when the dental implant is placed at the same time that the tooth or teeth are removed. The advantages of this approach are a reduction in treatment time and bone preservation. Whether or not this is possible will depend on the condition of your bone at the time of extraction. If infection is present it may be necessary to defer implant placement for three months while new healthy bone reforms in the area.
2. Delayed dental implant placement is insertion of the implant into a region of the mouth where the tooth or teeth have previously been removed or have been missing for some time.

Implant treatment may entail a combination of the above insertion types and the time required to place them will depend on the number being inserted and their position in the mouth. Every effort will be made to keep the time to a minimum whilst not jeopardising the final result.

The upper jaw is prepared for the implants by making a hole in the bone by either drilling to cut a channel or by forming the channel using small punches which are tapped through the bone. The latter may entail the use of a small mallet which can potentially cause symptoms of nausea or imbalance following the procedure. These symptoms do not persist and subside after several weeks or in rare cases a few months. Which technique is used depends on the density of the bone being prepared and occasionally may entail a combination of the two techniques. The lower jaw is prepared using drilling only.

RARE POSSIBLE COMPLICATIONS OF TOOTH EXTRACTION

As part of the implant treatment it may be necessary to extract teeth to provide bone for the implants or remove diseased teeth. Extracting a tooth entails a surgical procedure inside the mouth that cuts the gum and occasionally bone removal is required. Following this procedure there may be some discomfort, swelling, limitation of opening of the mouth and possible bruising around the jaw which may last up to a week. If painkillers and antibiotics are required these will be prescribed. Depending on the degree of difficulty time off work for convalescence may be required. In the vast majority of cases the extraction of teeth only causes minor discomfort but there are occasionally rare complications associated with the procedure.

For lower teeth especially at the back of the mouth, their roots may be closely associated with nerves so, even with the greatest care, you may have some pins and needles" feeling, tingling sensation or numbness

in your tongue or lower lip after the operation. This usually goes within a matter of weeks. Rarely, it takes longer (up to a few months) and, exceedingly rarely, it might be permanent.

Upper molar teeth have roots that are closely associated with the nasal sinuses. Because of this, very rarely during extraction a passage from the mouth into the nasal sinus is unavoidable. This would have to be closed with stitch and will seal in a few months. If stitches are inserted they may not be dissolvable and will need to be taken out about a week later. Occasionally a fragment of the tooth can also be accidentally displaced in the sinus and an operation will be necessary to remove it from the sinus to prevent infection.

TEMPORARY DENTURES

As part of your implant treatment you may have been provided with a removable plate as a temporary replacement for your missing teeth or tooth while your implant(s) are attaching. If you have not worn this type of appliance before it will normally take you several days to adapt to using it and gain confidence. Every effort will have been made to ensure the denture fits and looks as good as possible; in fact the denture will often look much better than your original teeth. The denture may have been fitted directly following tooth removal so that no embarrassing spaces are left, immediately restoring the smile.

Over several months the denture may loosen due to the underlying supporting gum tissue changing shape as it settles following implant placement or tooth removal. In order to compensate for these changes the denture will need to be relined to improve the fit. Occasionally the plastic used to make the denture may fracture especially if the bite is strong. If this should occur or even if you feel the denture does not fit correctly or causing discomfort then contact the surgery immediately so that the technician can correct the problem and limit any possible inconvenience.

This is very important as an ill-fitting denture can cause damage to the gum tissue and even result in implant failure. The denture should only be repaired and adjusted at the practice to ensure no errors occur which could affect the long term success of the implant treatment. Should it not be possible to return for repair or adjustment, please ensure that the dentist contacts the surgery before embarking on modifications so that the correct advice can be provided.

TYPE OF ANAESTHETIC

The procedure is usually performed under a local anaesthetic.

AFTER IMPLANT PLACEMENT

After the procedure there will be some discomfort and swelling. The degree of swelling will depend upon the number of implants placed and whether or not additional surgical procedures were carried out. Occasionally, along with the swelling, there may also be slight bruising of the skin overlying the area which will fade over a week. If you are a smoker or have a pre-existing medical condition which affects soft tissue healing, the amount of swelling may be greater. The gum tissue in the region where the implants have been placed may change appearance or colour and take on a white appearance for a short time (normally two weeks) after surgery.

After 6/10 days once the soft tissue has healed sufficiently, the stitches are removed. If dissolving stitches have been used this may not be necessary. During this period it may not be possible to wear dentures. After this stage the implants will be left undisturbed for at least three months to attach to the jawbone. During this period the top of the implant may show through the gum slightly and metal may become visible. Although this is normally no cause for concern, should it occur please contact the practice to have the area checked.

MAKING THE NEW TEETH

After a 3/6-month period a second surgical procedure may be necessary to expose the implants and check for firm bony attachment. In the event that an implant has failed to take it can simply be removed, as it will not be attached to bone. Once the implants have been uncovered and are firm, a post or abutment will be

connected which will be used to support either a provisional denture or bridge. This intermediate stage will last approximately two months allowing time for the gums to settle and form a tight attachment to the implant abutment. During this time the abutment may become visible as the gum shrinks slightly exposing the underlying metal. The final teeth will be made to cover as much of the exposed metallic areas possible improving the final appearance. Impressions will be necessary prior to construction of the final restoration.

APPEARANCE OF THE FINISHED TEETH AND GUM

Every effort will be made to ensure your final teeth look natural and just the way you want them to appear. Unfortunately it is not always possible to guarantee the appearance or level of the gum tissue surrounding the implant teeth. This may be the case if you have had gum disease in the past, been without teeth for several years, smoke or have lost jawbone as the result of an accident. This is particularly important if you show a lot of gum and tooth when smiling or have had natural teeth in the area crowned in the past. In certain situations it may be necessary to have new crowns made as a result of gum shrinkage following the procedure. In these situations it may also be necessary to replace the missing or damaged gum by using additional gum grafting procedures or by the application of artificial gum coloured plastic.

If any of the above is particularly relevant to your treatment then the treating dentists will explain the implications to you and will discuss the alternatives with you should they be required.

ADJUSTMENT OF THE NATURAL TEETH

If the implant tooth or crown is biting against natural teeth occasionally it may be necessary to adjust the height or size of the real teeth. This is because natural teeth have a tendency to continue growing out of the gum or drift when they have no corresponding tooth to bite against. As a result the size of the tooth may need to be reduced by slight grinding to correct the over-eruption or to increase the amount of space required to accommodate your new implant tooth. This tooth adjustment if required in your particular case will be discussed with you before any alterations are made. As the tooth modification procedure is only minor a local anaesthetic is not required.

ADJUSTMENT OF THE IMPLANT TEETH

On the day of fitting the new implant supported teeth it may be necessary to reshape them and adjust their length in the mouth. This is normal and does not mean the teeth are not correct but that fine tuning to the bite can often only be carried out in the mouth itself. Occasionally, if a lot of modification is required the teeth may have to be returned to the laboratory for final alterations to be made prior to fitting.

During the first few months following fitting of the implant restoration if the bite is not quite in balance the new teeth may chip slightly as part of the bedding in process. Often all that is required is to smooth the area to complete the adjustment. If more severe damage has occurred it will be necessary to return the teeth to the dental technician for renovation.

TREATMENT TIMING

The total treatment time required will vary with the degree of difficulty and the amount of work needed. It is important to bear in mind that the teeth have to be made individually to suit your specific requirements and mouth. This type of precision work is very time consuming and cannot be rushed, as it must be of the highest quality. Prior to fitting the finished teeth a variable number of visits may be necessary to make fine adjustments to the teeth. Therefore, it is important to keep your dentist informed of any travel arrangements or important engagements you may be planning and to give as much notice as possible.

WHAT HAPPENS IF THE IMPLANTS DO NOT TAKE

Fortunately this occurs rarely and the success rate for dental implants is 95%. However, failures are still a possibility and an understanding of this is a prerequisite for proceeding with your treatment. Any potential problems specific to your implant treatment will normally have been anticipated and discussed with you before treatment starts.

Should an implant fail to take then it is often possible to replace it with a second implant at the same time as the first implant is removed. It will of course be necessary to wait a further six months while the second new implant attaches to the bone. It is not difficult to remove the failed implant at this time, as it will be very loose and is easily removed.

FACTORS ASSOCIATED WITH AN INCREASED RISK OF IMPLANT FAILURE

Overall, dental implant failure is low and there are no absolute contraindications to implant placement. However certain conditions have been found to be correlated with an increased risk of failure. If you are over age 60, smoked, had a history of diabetes or head and neck radiation, or were postmenopausal and on hormone replacement therapy there is a significantly increased chance of implant failure compared with healthy patients.

Even in healthy individuals it has been shown that alcohol and tobacco consumption can reduce the rate of success. These habits also have an effect on the rate of healing and may increase the chances of post-operative infection.

Studies have shown that smoking significantly increases the risk of implant failure. If you smoke even lightly then your chances of success are reduced by 15% and if you smoke 20 or more cigarettes a day the failure rate may be 30%. For this reason implants are not recommended in smokers unless the habit is stopped. Starting smoking following implant placement is very likely to result in loss of implants which have successfully taken and cause infection of the gum surrounding the implant.

AFTER CARE AND MAINTENANCE REQUIREMENTS FOR IMPLANTS

Implants are not "Fit and Forget". They need the same care and attention as nature teeth. On completion of treatment it will be necessary for you to attend a number of recall appointments to check the condition of the implants and to adjust the bite if required.

After this, regular 6/12 monthly dental check-ups are required to monitor the condition of the implants and any remaining natural teeth. You should also maintain regular hygiene appointments, as a build up of plaque will cause gum problems and possible bone loss from around your implants, resulting in their eventual loss.

If you have teeth and implants mixed together it is also very important to maintain the health of the natural teeth. Should the natural teeth become infected or are lost for any reason the remaining implants may be damaged by the extra pressure caused by the addition work load.

ACCEPTANCE FOR TREATMENT

Patients will only be accepted for this treatment if they can demonstrate that they can maintain a high level of plaque control and oral hygiene. There should be no medical conditions that would contraindicate the procedure. It is important to inform the dentist of any changes to your general health or medical condition.

PATIENT STATEMENT OF INFORMED CONSENT TO UNDERGO PROPOSED DENTAL TREATMENT AND IMPLANT THERAPY

Carefully read each of the following four paragraphs and having read and understood each statement please initial each on the dotted lines that follow each section. In signing the form at the end of this section, you are stating that you have read the introduction to implant treatment, consent form and the following sections on your specific proposed treatment. Although it contains medical/dental terms that you may not completely understand on first reading, you have the opportunity to ask questions and have them answered to your satisfaction, such that you understand the information in this form and letter.

Initials.....

COMMITMENT TO ONGOING MAINTENANCE

Some of us have naturally strong teeth and gums while others, less fortunate do not and require surveillance to prevent a rapid deterioration in their health. Superimposed on this is the complexity and amount of the dental work you have received. Some types of dental restoration require only periodic review while more advanced forms of oral reconstruction such as dental implants need more frequent inspection especially if you have been prone to gum disease or smoked in the past.

An Implant maintenance programme is devised especially for you and separate to any dental reviews you may usually attend. The maintenance scheme and oral hygiene programme is designed to meet the challenge of your individual needs and abilities. This means your oral health maintenance programme will be formulated to combat your susceptibility to oral disease.

Your maintenance programme will be focused on your implant restoration and usually entails; cleaning of the implant restoration, checking the gums and bone around the implants are still healthy which may entail the taking of X-rays. Depending on how well your implants are functioning the length of time between maintenance visits may be changed to be responsive to your needs. An effective maintenance programme is important for the early identification of disease and is essential to prevent bone loss and progression ultimately to implant failure.

High long-term survival and success rates of dental implants can be achieved in patients who commit to their maintenance programme. Your maintenance programme requirement is based on; your current health status, previous dental history, and condition of your remaining teeth, gums and bone.

On completion of your treatment you will be offered a maintenance programme as outlined above to meet your needs. You may of course decline to participate in our programme and obtain regular maintenance at another clinic which we will be pleased to assist you with. Our primary aim is to ensure the continued health and function of your implant restoration.

The assessment indicates that your proposed implant treatment will most likely be considered as

CONSENT SUMMARY

I state that:

- I have received the comprehensive information verbally during my consultation.
- I have read and understood the contents of the above consent and have been given every opportunity to ask questions about dental implants and have received satisfactory explanations.
- I have been informed and I understand the purpose and the nature of the implant surgical procedures and the benefits and improvement it will bring to my present dental status.
- Dr Stewart Harding and/or his colleagues have carefully examined my mouth. I have understood the alternative options to implant treatment, which have been explained to me. I have carefully considered these options and I have decided on the implant treatment option.
- I have been informed of, and understood the possible risks and complications involved in minor oral surgery such as pain, bleeding and swelling.
- I understand that there is no method that can predict with absolute certainty the gum and bone healing capacity in each individual patient following the placement of a dental implant.
- I understand that sometimes implants fail and must be removed hence no absolute guarantees or assurances as to the outcome of results of treatment or surgery can be made.
- I understand that if I am having lower implants placed there is a risk of numbness to the lower lip - this is due to the anatomical structures and nerve sites.
- I understand that excessive smoking, alcohol or sugar intake may affect gum healing and may limit the success of implants.
- I undertake to follow all written home-care instructions.

Initials.....

COST OF YOUR TREATMENT AND TERMS OF FEE PAYMENT

The fee is payable in two instalments, first half at insertion of implant, the second half at crown placement on the implant. This amount is not refundable in case of any failure during treatment or anytime after tooth placement or should you decide to withdraw before the completion of your proposed treatment. A 3% interest rate will be charged per month on outstanding amounts for late payment of fee. The fee includes the first years maintenance and a review appointment at the end of the first year together with X-rays if clinically indicated.

On completion of treatment you will need to attend our practice for implant maintenance (including x-rays) and hygiene designed to suite your specific needs at an additional \$199.

After this further annual review appointments will be charged at our normal rate.

Your total fee will be \$5000 and is payable in two stages as above, \$2500 when the implants are placed followed by the balance \$2500.

Initials.....

If you wish to proceed with the treatment described you will need to complete and sign all the sections of the enclosed consent form.

Forty eight hours notice of cancellation will be required to avoid a charge.

Implant Consent Form

Patients Surname:.....

Forenames: Date of Birth:

Sex: (Please Ring) MALE FEMALE

DENTIST (This section to be completed by the dentist).

I confirm that I have explained both verbally and as described in this letter the procedure or treatment, and such appropriate options as are available to the patient in terms which in my judgement are suited to the understanding of the patient.

Dr L Robert Ayar

Date:

PATIENT (This section to be completed by the patient).

1) If there is anything that you do not understand about the explanation, or if you want more information, you should ask the dentist.

2) Please check that all the information on the form is correct. If it is, and you understand the explanation letter, then sign the form.

3) A copy of this consent letter and form will be kept with your medical notes.

I am the patient (Mr./Mrs./Miss).....

I agree to:

- the procedure that has been proposed and explained to me by the dentist named on this form.
- the administration of either a local general or other appropriate anaesthetics
- the terms and conditions of fee payment as stated above

I understand:

- that the procedure may not be completed or carried out by the dentist who has been treating me so far
- and have been fully informed of the nature of the treatment outlined above and of any likely complications of the treatment
- that any procedure in addition to the treatment described in this letter will only be carried out if necessary and in my best interests and can be justified for medical reasons.

I have:

- told the dentist about any additional procedures I would not wish to be carried out without my having the opportunity to consider them first.
- informed the dentist about my existing medical conditions and infectious diseases that are known to me.
- informed the dentist about any previous or current psychiatric conditions or treatment.

Name:.....

Signature..... Date:.....

Please return to your dentist.