## Lakeshore West Dental

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## REQUEST FOR TREATMENT & CONSENT SINUS LIFT PROCEDURE WITH BONE GRAFTING AND PLACEMENT OF IMPLANTS

PATIENT NAME:\_\_\_\_

I authorize and request Dr. Sam Patel to perform surge Sam Patel is a general dentist and a referral to a special	
up adequate bone height for the placement of implants material (hydroxylapatite), human tissue bone bank, a of any of the above. In approximately five to six mon procedure will be done to insert the implants into the	nimal sourced bone, bone from you, or a combination ths after the graft has partially healed, a second upper jaw and the grafted material. In some cases, it the sinus in the same operation. It is expected that the
Dr. Sam Patel has explained that if new bone does not incorporate into the bone graft material, alternative prosthetic measures will have to be considered. Dr. Sam Patel has explained and described the procedures to my satisfaction and understanding. The likelihood of success of the suggested treatment plan is good. However, there are risks involved. The bone graft material has produced good results when placed on top of the upper and lower jaw ridge. However, there are insufficient long term studies to evaluate placement of this material on the sinus floor. This bone graft replacement material has previously been shown to be free from rejection or infection. There is no guarantee that your graft will not become infected or be rejected.	
There have been some cases of failure of this graft to occasionally, implants have failed and require removal implants reinserted.	
It is understood that although good results are expecte warrantable. There is also no guarantee against unsati regardless of cause of failure and additional fees will a result of graft or implant failure.	isfactory or failed results. No refund applies
I HAVE READ AND UNDERSTAND THE ABOV FOR SINUS LIFT WITH BONE GRAFTING AN	TE & WISH TO PROCEED WITH TREATMENT D PLACEMENT OF IMPLANTS.
signature of patient/parent guardian	print name
date	signature of witness