

Lakeshore West Dental

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WHITENING CONSENT FORM

Whitening is a procedure that is designed to lighten the colour of your teeth. When done properly, whitening will not harm your teeth or gums. Significant lightening can be achieved in the vast majority of cases, but the **RESULTS CANNOT BE GUARANTEED**. Whitening, like any other treatment, has some inherent risks and limitations. These are seldom serious enough to discharge you from having your teeth whitened, but should be considered in making a decision to have the treatment. In addition, there are variables, such as the type of discoloration that affects your teeth, the degree to which you follow our instructions, the overall condition of your teeth, etc., which can affect the outcome of treatment.

CANDIDATES FOR WHITENING: Just about anyone is a candidate for whitening. However, people with the dark yellow or yellow-brown teeth tend to whiten better than those with gray or bluish-gray teeth. Multicolored teeth, especially if stained due to tetracycline, do not whiten very well. In addition, teeth with many fillings, cavities, chips, etc., are usually best treated by bonding, porcelain veneers, or porcelain crowns.

TYPES OF WHITENING:

1. **HOME WHITENING:** This process involves wearing a custom-made whitening tray (looks like a thin transparent night guard) filled with a mild whitening material. You will need to wear the paste-filled tray 2-8 hours per day for about two to four weeks. We check your whitening progress periodically.
2. **IN OFFICE WHITENING:** Is a fast way to achieve the same results as the home whitening. We do all the work while you relax in our office. Our fees are typically higher for this procedure.

KEEPING YOUR APPOINTMENTS: When in office whitening is done, there seems to be more lightening when your appointment is spaced 1-2 weeks apart. If more than two weeks go by between appointments, some momentum is lost and the whitening results may take longer to achieve.

WEARING YOUR WHITENING TRAY: If you choose home whitening, it will only be effective if you conscientiously wear the whitening tray for the prescribed number of hours per day.

COMMUNICATION: If you experience any severe discomfort or other problems, contact us immediately.

POTENTIAL PROBLEMS

1. **TOOTH SENSITIVITY:** During the first 24 hours following whitening, many patients experience sensitivity. This sensitivity is usually mild if your teeth are not normally sensitive. With home whitening, it may be necessary for you to reduce the number of hours you are wearing the whitening tray or stop using it for a short time to resolve the sensitivity. A home fluoride kit may need to be purchased if sensitivity persists. However, if your teeth are normally sensitive, whitening may make your teeth much more sensitive for an extended period of time. Under these circumstances, you may choose to delay whitening until we are able to complete desensitization procedures. If your teeth are sensitive after whitening, a mild analgesic such as Tylenol or Advil will usually be effective to make you feel more comfortable until your teeth return to normal.
2. **GUM IRRITATION:** whitening can cause temporary inflammation of your gums. A burning sensation in your gums may also occur. This is a minor problem and will resolve by itself in a few days. With home whitening, irritation can result from using the whitening tray too many hours when you first start whitening or using the whitening tray too many hours in a row without a break. It may be necessary for you to reduce the number of hours you are wearing the whitening tray or stop using it for a short time to resolve these gum problems.
3. **SORE THROAT:** If you overload a whitening tray with the paste, the excess can go down your throat and cause soreness. This soreness will also resolve in several days.
4. **LEAKING FILLINGS OR CAVITIES:** Most whitening is indicated for the outside of the teeth (unless you already had root canal). However, if you have any fillings that are leaking and allow the whitening to get inside of the teeth, damage to the nerves of the teeth could result. In this case, the fillings need to be redone prior to the whitening. In addition, open cavities can also allow the whitening material to reach the nerves. They should also be filled before whitening.
5. **CERVICAL ABRASION/EROSION:** These conditions affect the roots of the teeth when gums recede. They are the grooves, notches, or depressions where the teeth meet the gums that look darker than the rest of

the teeth. They look darker because there is no enamel in these areas. Even if these areas are not sensitive, bleach can potentially penetrate the teeth and damage the nerves. These areas should not be whitened, but should be filled after the whitening is completed.

6. ROOT RESORPTION: This is a condition where the root of a tooth starts to dissolve, either from the inside or outside. Although the cause of the resorption has not been determined, studies have shown that its incidence is higher in the teeth that have had a root canal and then are whitened.
7. EFFECT ON FILLINGS: Even though open cavities should be filled or badly leaking fillings should be refilled prior to bleaching, home bleaching can cause tooth-coloured fillings to become softer and may make them more susceptible to staining. Therefore, you should be prepared to have any fillings in your front teeth replaced anyway, so that they will match your newly whitened teeth.

COMPLETION OF TREATMENT:

1. LEVEL OF LIGHTENING: There is no totally reliable way to predict how much your teeth will whiten. With home whitening, three to four weeks wearing the whitening tray daily for 2-8 hours will give you much lighter teeth. Additional whitening may provide slightly more effect but increased side effects may occur. We do not recommend home whitening for any longer than four weeks.
2. RELAPSE: Following the completion of whitening, there may be a gradual relapse of the teeth back to their original colour. To reverse this relapse, a touchup treatment may be necessary. You may choose to wear you whitening tray for a few days periodically, depending on you home habits, to maintain your results.

I have read and understood the procedure. The above information has been explained to me and I have had the opportunity to ask questions. I consent to this treatment.

patient signature

print name

date

witness signature

print name

date