Lakeshore West Dental

3390 Lake Shore Blvd., W. Etobicoke, Ontario, M8W 1M9

Office: 416-251-5707 lakeshorewestdental@gmail.com

Date _____

Date _____

INFORMED CONSENT TO WISDOM TOOTH SURGERY
Patients Name
PURPOSE OF TREATMENT Extractions are considered for: orthodontic reasons, severely decayed teeth, infected teeth with severe periodontal disease and impacted teeth or for the prevention of future infection or problems. After removal of a tooth, an artificial bone graft may be placed into the socket to preserve the jawbone. I have been informed that Dr. Sam Patel is a general dentist and a referral to a specialist (oral surgeon) has been offered.
POTENTIAL COMPLICATIONS The following is not a list of all the potential complications but it does cover the most common ones. PAIN: Varies individually and can be controlled with medication. BRUISING, SWELLING & DIFFICULTY OPENING: Generally resolve within one week. BLEEDING: A small amount of bleeding is not unusual for a day and should stop by applying firm pressure with gauze. More than this is unusual and requires attention by the surgeon. INFECTION: The chances of post-op infection increase with smoking and poor oral hygiene. Should infection develop, it may require additional oral antibiotics or IV in a hospital setting, dressing the wound, or sometimes an incision and draining. Signs and symptoms of infection include severe pain, non-resolving swelling, foul odor, fever and chills. NUMBNESS: Surgery in the jaw is often close to the nerves and there is no test that can accurately predict where nerves lie in the gum or bone. Damage to the nerve can result in temporary or permanent changes in the sensation of the affected area. This includes numbness, tingling, painful sensations or a loss of taste sensation. While occurrences of such changes in the sensation are uncommon, very little can be done if they occur.
FRACTURES: Broken jawbones are a rare complication. The risk does rise with older patients and when the bone is severely resorbed. Should a fracture occur, wiring of the jaw or wearing of a splint or denture may be necessary. REMAINING ROOTS & SHARP BONY EDGES: Small pieces of the tooth root may remain in the jaw if it is decided that its removal would complicate the surgical outcome. Another surgery may be required to smooth the edges.
SINUS PROBLEMS: Surgery in the upper jaw may be complicated by the position of the sinus. Should tooth or root be lodged in the sinus, future surgical procedures may be required to remove it. Opening of the sinus is also possible and may require medication or surgery to repair it.
DAMAGE TO ADJACENT TEETH: Sometimes, an adjacent tooth or its supporting structures may be damaged. The chances of this are increased if the adjacent tooth is weak with a large filling or crown. Subsequent problems may necessitate either root canal or extraction of the affected tooth. REJECTION OF THE BONE GRAFT: A biocompatible synthetic material is utilized for the bone grafting process.
There have not been any reported rejections of the material utilized. If a rejection does occur then a second surgical procedure will be needed to remove the graft. CONSENT: I have read the above information and the dentist has explained the points that are pertinent to my case and I been given alternatives. I understand this information and understand that there is no guarantee that the proposed treatment will be successful in correcting the condition. I realize there is a risk of failure, relapse, selective re-treatment or worsening of the present condition despite care provided. I have had the opportunity to ask questions and my questions if any have been addressed.
Tooth/Teeth to be Extracted and/or Grafted
Patient Date

Dentist _____