



Patrick S. Burchfield DDS & Gregory M. Melton DDS

4444 Carter Creek Pkwy Suite 101, Bryan, Texas 77802

(979) 846-7799

www.burchfielddds.com

Informed Consent for Orthodontic Treatment

Patient Name: _____

Date: _____

The Following information is routinely provided to anyone considering orthodontic treatment with Dr. Patrick S. Burchfield D.D.S., P.C. While recognizing the benefits of a pleasing smile and healthy teeth, you should also be aware that orthodontic treatment, like any treatment of the body, it has inherent risks and limitations. These occur seldom enough to rule of treatment, but should be considered when deciding to wear Invisalign. Please note that it is impossible to list every possible circumstance so this has to be considered an incomplete list. Please read this consent carefully and ask Dr. Burchfield to explain anything you do not understand. **Certain amount of discomfort should be expected when Invisalign put on at each visit**.

Root Resorption: In a few cases, the ends of the roots of the teeth are shortened during treatment. In the event of subsequent gum disease, this root end could reduce the longevity of affected teeth. Under healthy circumstances, the shortened tooth roots are no disadvantage. It is nearly impossible to predict susceptibility to this condition and nothing can be done to prevent this from occurring.

Return of Original Problem: Many problems tend to return by a factor of about 10%-30%. Especially, very severe problems are more so. We will make our correction to the highest standards and hold the result carefully. When the retention is discontinued, we will expect some returns. Careful cooperation during the retention period will keep this rebound to a minimum.

Decalcification, Decay, or Gum Disease: These problems may occur if the patient does not cooperate with BRUSHING, FLOSSING, AND REGULAR CHECK UPS!! Also essential is proper dietary control, with special attention to the amount and frequency of sugar in the diet. With adults, we ask for increase attention to prevent gum disease. If periodontal disease occurs during the course of treatment, it may be difficult or impossible to control the bone loss and subsequent loss of teeth. If you are referred to a periodontist (a dentist who specializes in gum and bone problems) during orthodontic treatment, it is your responsibility to follow through with the periodontist stating it is safe to continue teeth movement. The need for periodontal treatment will likely increase the total length of orthodontic treatment time and therefore the cost of orthodontic treatment. If you choose not to proceed with any recommended gum therapy, we will have no other choice than to hold the trays of the continued invisalign.

Orthognatic (Jaw Modification) Surgery Cases: As this is not an exact science and many complex factors influence the course of the treatment, it is impossible in certain individual cases in orthodontic treatment that jaw modification surgery will be required at some phase during the course of the treatment, it is understood that you have the choice to discontinue or be referred to another dentist or orthodontist to treat the surgical phase of the case.

Treatment Progress: Can be delayed beyond forecast. Lack of facial growth, gum disease, broken appliances, missed appointments and payment delinquency are all important factors.

Additional Treatment: If unforeseen circumstances occur (gum problems, growth changes), we will carefully explain the reasons for a change in treatment plan and any extra fee before proceeding.

Late Growth Changes: Can upset most careful treatment plan. A person who has grown in an average proportion may not continue to do so. Skeletal growth disharmony is a biological process beyond the

Dentist's control. If growth becomes disproportionate, the jaw relationship can be seriously affected and original treatment objectives may not be met.

TMJ Pain: Some patients are very sensitive to even a slight discrepancy in their bite. These patients may suffer from noise or pain in the joint of the lower jaw (near the ear). This may occur during or after orthodontic treatment. It also happens in patients who have never had orthodontic treatment. Let us know if you suspect of any problems as it may require additional treatment by another dentist. An imperfect bite may also cause TMJ problems. Often orthodontic therapy cannot result in an absolutely perfect bite because of the complex factors influencing the alignment of your teeth.

Devitalization: It is possible for a tooth to die during orthodontic treatment, especially if it was previously injured or was impacted. Sometimes such injuries are unknown to the patients or parents. Such previous injuries are known cannot be detected by the dentist. For that reason, a tooth may die and the reason for it may not be apparent. Root canal treatment may be recommended if you have such a problem. Extraction is usually not necessary.

Allergic Reaction: Allergic reactions to dental materials or medications are rare but do occur occasionally. Cold sores, canker sores and irritation or injury to the mouth are impossible while wearing invisalign trays.

Success of Treatment: We intend to do everything possible to provide the best results in every case and it is our opinion that the treatment will be beneficial. However, we cannot guarantee that the proposed treatment will be successful or to your complete satisfaction. Due to the individual patient differences, there exists possibility of failure, relapse, or selective retreatment, despite the best of the care. Much of the success of the treatment depends on the understanding and cooperation of the patient.

Removal of Teeth: Sometimes teeth must be extracted as part of the orthodontic procedure. This will be based on the dentist's judgement. Such removal can include but is not limited to third molar teeth (wisdom teeth) and may not be done by the dentist, in certain cases it may be referred to an oral surgeon as deemed necessary, and is NOT included in the orthodontic fee.

Interceptive (Phase I) Orthodontic Treatment: For patients with mixed dentition (some baby teeth remain), this treatment attempts to provide a more favorable environment for conventional (Phase II) treatment. Phase I is entirely separate from Phase II treatment. Each phase has its own goals and requires its own treatment plan.

There is a separate fee for each phase of treatment.

Appointment Scheduling: The dentist may need to schedule some appointments that conflict with school or work schedule. While such appointments will be as infrequent as possible, it is essential these appointments are kept to achieve treatment goals and to help better use the dentist's time which keeps our fees lower.

I have read and understand the above and have had the opportunity to discuss it with the treating dentist, to clarify any areas I do not understand and I authorize to provide an orthodontic treatment for _____
_____ (patient's name).

I further understand that like other healing arts, the practice of orthodontics is not an exact science; therefore, results cannot be guaranteed.

Signature of Patient or Legal Guardian

Signature of Witness