

Hickman Orthodontics

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ORTHODONTIC TREATMENT FOR CHILDREN, TEENS, AND ADULTS

INFORMED CONSENT FORM

As a rule excellent orthodontic results can be achieved with informed and cooperative patients. 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, has some potential risks and limitations. These are rare and seldom contraindicate undergoing treatment, but should be considered when making the decision to wear orthodontic appliances. It is my purpose to inform you of these potential risks and limitations before you give your consent to begin treatment.

1. Limitations:

In orthodontics perfection is our goal. However, perfection is not always possible. Inherent in treating human beings are the limitations of genetics, growth and development, muscle imbalance, severity of the orthodontic problem, poor oral hygiene and patient cooperation. Often a functionally and aesthetically adequate result must be accepted instead of a perfect result.

Unpredictable Growth:

Occasionally a person who has grown normally and in average proportion may not continue to do so. If jaw growth becomes disproportionate, the tooth relations can be affected and the original treatment objectives may have to be compromised. Occasionally additional treatment and extractions must be instituted to obtain an adequate result. This skeletal growth disharmony is a biological process beyond the orthodontist's control.

Dental Care:

All necessary filings must be completed prior to treatment. Patients must visit their dentist at six-month intervals during both active treatment and retention for their regular dental checkups and dental treatment. Orthodontic treatment does not include dental care such as periodic dental x-rays, fillings, cleaning teeth, or extractions for orthodontic reasons.

Appliance Breakage:

The orthodontic appliance consists of stainless steel bands, ligature wires, brackets, springs, elastics, headgear, and arch wires and other appliances. These appliances are delicate and must be maintained. If any part of the appliances becomes loose, broken, or deformed between visits, I should be informed immediately to prevent irreparable damage.

Oral Hygiene:

Decalcification (permanent markings), decay or gum disease can occur if patients do not brush their teeth properly and thoroughly during the treatment period. Excellent oral hygiene and plaque removal is a must. Sugar and between meal snacks should be eliminated.

Headgear Caution:

Headgear instructions must be followed carefully. A headgear that is pulled outward while the elastic force is attached can snap back and poke into the face or eyes. Be sure to release the elastic force before removing the headgear from the teeth.

Treatment Time:

The total time for treatment can be delayed beyond our estimate. Lack of or too much facial growth, poor elastic wear or appliance cooperation, broken appliances, and missed appointments are all important factors, which could lengthen treatment time and affect the quality of the result.

Post Retention Changes:

Throughout life, tooth position is constantly changing. This is true of all individuals, regardless of whether they have had orthodontic treatment or not. In their late teens or early twenties our patients may notice slight irregularities developing in their front teeth. This is particularly true if their teeth were extremely crowded prior to treatment. Correction of these recurring irregularities may require additional treatment and sometimes, permanent retention.

2. Risks:

Non-Vital:

On rare occasions the nerve of a tooth may become non-vital. A tooth that has been traumatized from a deep filling or even a minor blow may slowly die over a long period of time with or without orthodontic treatment. An undetected non-vital tooth may flare up during or after orthodontic movement requiring endodontic (root canal) treatment to maintain it.

Root Resorption:

In some cases, the root ends of the teeth are shortened during orthodontic treatment. This is called root resorption. In unusual circumstances a tooth may be lost from root resorption (very rarely). Shortened roots usually do not cause problems. However, in the event of gum disease in later life, root resorption could reduce the longevity of the affected teeth. It should be noted that not all root resorption Trauma, genetics, cuts, impactions, hormone disorders, or unknown reasons can also cause root resorption (very rarely). Shortened roots usually do not cause problems. However, in the event of gum disease in later life, root resorption could reduce the longevity of the affected teeth. It should be noted that not all root resorption arises from orthodontic treatment. Trauma, genetics, cuts, impactions, hormone disorders, or unknown reasons can also cause root resorption.

Jaw Joint Problems:

There is also a risk that problems may occur in the temporomandibular joints (jaw joints). Although this is rare, it is a possibility. Tooth alignment or bite correction can improve tooth related causes or jaw joint pain but not in all cases. Tension appears to play a role in the frequency and severity of joint pains. Doctor has permission to display slides, models or x-rays of the patient for scientific or educational purposes.

The treatment fee includes one year of retention visits. An additional charge will be made for lost or broken retainers.

No practitioner of medicine or dentistry can guarantee any result but can only indicate that everything possible will be done to resolve the particular problem. To this end you have my assurance.

It is affirmed that the treatment objectives, treatment plan, alternative risks of adverse affect, probability of success and expected benefits have been explained to the patient and parent. Having been so informed, the patient / parent consents to the treatment.

Patient _____ Parent _____ Date _____

