
INFORMED CONSENT ORAL SURGERY AND DENTAL EXTRACTIONS

I UNDERSTAND that if my tooth has been badly damaged due to decay, disease or injury then it is advisable to save the tooth by performing root canal therapy provided the tooth can be restored and the bone around the tooth is sound. After the root canal therapy is completed a crown may be required to protect the tooth and restore the tooth to normal function.

I UNDERSTAND that when a tooth is extracted it requires replacement with a denture, bridge or implant. If it is not replaced, the space can cause the opposing tooth to over-erupt and neighbouring teeth to tilt, affecting your bite and ability to chew. The drifting teeth create food impaction area where decay or gum disease starts.

I UNDERSTAND that Dr Stephen Wong is a Dental Surgeon who routinely carries out oral surgery and dental extractions, including wisdom teeth removal and is not a specialist Oral & Maxillofacial Surgeon.

I UNDERSTAND that ORAL SURGERY and/or DENTAL EXTRACTIONS include possible inherent risks such as, but not limited to the following:

1. **Injury to the nerves** of the lips, chin, tongue, the tissues in the floor of the mouth, and/or the cheeks, etc. These possible nerve injuries can cause numbness, tingling, burning, and loss of taste in the case of the tongue which may be of a temporary nature lasting a few days, a few weeks, a few months, or could possibly be permanent.
2. **Bleeding and/or bruising:** Bleeding could last for several hours. Should it persist, particularly being severe in nature, it should receive attention and the office must be contacted. Bruising may possibly be prolonged.
3. **Dry socket** occurs on occasion when teeth are extracted and is a result of a blood clot not forming properly during the healing process. Dry sockets can be extremely painful. Smoking, alcohol and not following post-operative recommendations can increase the chances of this complication.
4. **Sinus involvement:** In some cases, the root tips of upper teeth lie in close apposition to the tissues of the sinuses. During extraction or surgical procedures, the thin bone and tissues surrounding the sinus membrane may be perforated. Should this occur, it may be necessary to have the sinus surgically repaired.
5. **Infection:** No matter how carefully surgical sterility is maintained, it is possible, because of the existing non-sterile or infected oral environment, for infections to occur postoperatively. At times these may become serious. Should severe swelling occur, particularly accompanied with fever or malaise, attention as soon as possible should be received and the office must be contacted. In some cases hospitalisation and/or treatment with I.V. antibiotics may become necessary.
6. **Fractured jaw, roots or bone fragments:** There is a possibility, even though extreme care is exercised, that the jawbone, teeth roots or bone spicules may be fractured which may require referral to a specialist for treatment. A decision may be made to leave a small piece of root or bone fragment in the jaw when its removal would require extensive surgery and/or risk of complications.
7. **Injury to adjacent teeth, fillings or porcelain crowns** may occur no matter how carefully surgical and/or extraction procedures are performed. Fractured fillings or crowns may require replacement.
8. **Swelling and difficulty in opening mouth** may be noticed following oral surgery and especially third molar extractions.

9. **Bisphosphonate Drug Risks:** For patients who have taken drugs such as Fosamax, Actonel or any other drug prescribed to decrease the resorption of bone as in osteoporosis, there is an increased risk of osteonecrosis or failure of bone to heal properly following any oral surgical procedure involving bone, including extractions.

10. **Air Emphysema:** During surgical extractions, there is a known but rare possibility that air may enter and become trapped in the tissues surrounding the extraction site. Assessment and management by a specialist oral maxillofacial surgeon may be required.

11. **It is my responsibility to contact the dentist and seek attention should any undue circumstances occur post-operatively and I shall diligently follow any preoperative and postoperative instructions given me.**

INFORMED CONSENT: I have been given the opportunity to ask any questions regarding the nature and purpose of surgical treatment and/or extraction of teeth, including consequences of no treatment and have received answers to my satisfaction. I have been given the option of seeing an oral and maxillofacial surgeon for this procedure. I do voluntarily assume any and all possible risks which may be associated with any phase of this treatment in hopes of obtaining the desired results, which may or may not be achieved. No guarantees or promises have been made to me concerning my recovery and results of the treatment to be rendered to me. The fee(s) for this service have been explained to me and are satisfactory. By signing this form, I am freely giving my consent to allow and authorise Dr Stephen Wong and/or his/her associates to render any treatment necessary or advisable to my dental conditions, including any and all anaesthetics and/or medications.

Tooth No(s):

Estimated cost:

Signature of Patient/Parent/Guardian/other

Mr Stephen Wong

Signature of dentist

Dr Stephen Wong