



Badger & Spiller

Orthodontics for Children and Adults

LETTER OF INFORMATION AND CONSENT AGREEMENT FOR ORTHODONTIC TREATMENT BY BADGER AND SPILLER, Inc.

As a rule, excellent orthodontic results can be achieved with informed and cooperative patients. The following information is routinely supplied to anyone considering orthodontic treatment in our office. While recognizing the benefits of a pleasing smile and healthy, functional teeth, you should also be aware that orthodontic treatment, like any treatment of the body, has some hazards, inconveniences and limitations. These drawbacks seldom outweigh the long-range benefits, but should be considered in making the decision to wear orthodontic appliances.

Perfection is always our goal. The orthodontist will use his knowledge, treating skill and experience to achieve perfect function that is also esthetically pleasing, but much depends on the patient's growth patterns, genetics, oral health and cooperation.

Throughout life tooth positions are constantly changing. This is true with all individuals regardless of whether they have worn braces or not. After orthodontic treatment, patients are subject to the same subtle changes that occur in non-orthodontic patients. In the late teens or early twenties orthodontic patients may notice slight irregularities developing in their front teeth. This is particularly true if their teeth were extremely crowded prior to treatment. Prolonged wearing of a retainer may be the only way to prevent this if it becomes undesirable.

Decalcification (permanent markings on the teeth), tooth decay, or gum disease can occur if patients do not brush and floss their teeth properly and thoroughly. Excellent oral hygiene and daily plaque removal are musts. Sugars and between meal snacks should be eliminated. Regular check-ups with the family dentist are necessary to check for decay and clean the teeth. Occasionally periodontal (gum) problems present before orthodontic treatment may be worsened by the wearing of braces and require treatment by another dentist specialist.

Cold sores, canker sores, and irritation or injury to the mouth are possible while wearing braces. Allergic reactions to dental materials or medications are rare, but do occur occasionally. There may be a need for extraction of teeth, fillings, crowns, bridges, gum treatment or other dental procedures before during or after orthodontic treatment. If necessary, this will be done by another dentist.

On rare occasions the nerve of a tooth may become abscessed. A tooth that has been irritated by a deep filling or even a minor blow may require treatment by another dentist.

In some instances the root ends of the teeth are shortened during treatment. This is called root resorption. Under healthy circumstances the shortened roots are no disadvantage. There are circumstances that may lead to loss of the teeth due to root resorption. This is a rare occurrence but always a possibility. There is no way to foresee whether this will happen and nothing can be done to prevent this from occurring.

There is also a very small chance that pain may occur in the lower jaw joint. Tooth alignment or bite correction can usually improve tooth related causes of jaw discomfort, but additional treatment by another dentist may be required. Occasionally a person who has grown normally and in average proportion may not continue to do so. If growth becomes disproportionate, the jaw position can be affected and original treatment objectives may have to be compromised. Skeletal growth disharmony is a biological process beyond the orthodontist's control. This disharmony may necessitate surgical correction in conjunction with orthodontic therapy.

Orthodontic treatment can succeed only through the joint cooperation of all parties involved. Together we can achieve the best possible result. In many instances, lack of cooperation in the requested use of headgear, elastics and retainers will make a successful completion of treatment impossible, or lengthen the duration of treatment.

We appreciate your confidence in selecting our office. We want you to be fully informed, so ask questions anytime. During the period of orthodontic treatment we will make models, X-rays and photographs which may be used for professional reference and display, orthodontic journals, books, and meetings and patient education.

Finally, during treatment we may disclose health information about you for treatment, payment and healthcare operations. For example, filing for insurance or consulting with another healthcare provider about treatment. This is detailed further in the Notice of Privacy Practices provided for you.

I have read and understand this letter of information and with this knowledge consent to treatment for:

Patient's name: _____ Date _____

Signature _____ Relationship to patient _____

Doctor Signature: _____