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INFORMED CONSENT FOR TOOTH EXTRACTION

Teeth maybe recommended for extraction (tooth removal) for a number of reasons, such as infection, breakage, abscess, and future treatment planning. You can elect at any time prior to surgery, not to have the extraction but this may lead to a worsening of the dental condition, i.e. infection, decay, cyst enlargement etc.

Please note side effects and complications are uncommon to rare and we at Smile Cliniq would hope our rate is even less than the norm, due to the techniques and equipment we use. Also bear in mind some of the complications are no different to any tooth extractions or oral surgery you may have had previously, it's just you are now aware of them.

There **may** be some pain or discomfort and swelling following a tooth extraction. This may require pain killers. There may also be bleeding of the socket. This is usually minor and easily controlled by applying pressure with a pack given at the time of the extraction

Occasional to Rare RISKS:

There are some risks / potential complications with extractions, which include:

- (a) Infection of the extraction socket (dry socket). This may cause some pain and discomfort, but is usually easily managed by the oral surgeon/ dentist
- (b) Biting of the numb lip, cheek or tongue which may cause trauma to the lip or tongue after the teeth have been removed, please take care not to bite the lip, cheek or tongue.
- (c) Bruising in the area of the injection and or overlying skin in area of extraction.
- (d) For **lower wisdom teeth** - Damage to the Inferior Dental Nerve of the Mandible (lower jaw). This nerve can pass very close to the root of the lower wisdom tooth (occasionally in contact with it) and gives feeling to the lower teeth, lower lip, and chin on that side. If this nerve is very close to the area of surgery there is a slight risk of some damage to the nerve. This may cause numbness of the lower teeth, lower lip and chin. This may be temporary (6-12 months) or permanent (in 1% of cases).
Damage to the Lingual Nerve on each side of the Mandible (lower jaw). This nerve passes very close to the tongue side of the lower wisdom tooth and posterior mandibular molar teeth and gives feeling and taste to that side of the tongue. If this nerve is very close to the area of surgery there is a slight risk of some damage to the nerve. This may cause numbness and loss of taste to that side of the tongue. This may be temporary (6-12 months) or permanent (1% of cases).

Damage to teeth growing tightly against the wisdom teeth during removal of the wisdom teeth.

Weakness of the jaw due to removal of the wisdom teeth.



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- (e) The tooth root tip may break off in small pieces – when the tooth is taken out. The oral surgeon/ dentist may or may not remove these pieces depending on the clinical picture, if there is a chance that the nerves or other structures may be damaged during removal, they may be left, or you may need additional surgery to remove the piece.
- (f) If the **upper teeth** are close to the sinuses, removal may cause a “hole” (oral- antral communication) between the mouth and the sinus. This may need further surgery.
- (g) Rarely, it is possible, that the root (normally of an upper molar tooth) may dislodge into the maxillary sinus. This may need further surgery to remove it.
- (h) Possible muscle stiffness (trismus) after extraction.
- (i) Rarely it is possible to damage the adjacent tooth during the extraction, or dislodge a restoration within that tooth (i.e. crown, filling), this can be re-cemented or further work may be required.

PATIENT CONSENT: By signing below, I expressly acknowledge that:

The dentist has explained my dental condition and the proposed procedure. (Patient Initials:____)

The dentist has explained any significant risks and problems specific to me, and the likely outcomes if complications occur. The dentist has also explained relevant treatment options as well as the risks of not having the procedure.

I understand the risks of the procedure, including the risks that are specific to me, and the likely outcomes.

I was able to ask questions and raise concerns with the dentist about my condition, the procedure and its risks, and my treatment options. My questions and concerns have been discussed and answered to my satisfaction.

I understand that other dental procedures may be done if further dental disease is found during the procedure, or to correct other problems in my mouth.

I understand that if teeth are removed during the dental treatment, that these may be retained for training purposes and then disposed of sensitively.

On the basis of the above statements, **I CONSENT TO HAVING THE EXTRACTION**

Name of Patient : «patient.firstname» «patient.lastname»

Signature : _____

Date : «general.date»



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I have explained: the patient's condition, need for treatment, the procedure and the risks, relevant treatment options and their risks, likely consequences if those risks occur, the significant risks and problems specific to this patient. I have given the patient/ substitute decision-maker an opportunity to ask questions about any of the above matters, raise any other concerns which I have answered as fully as possible. I am of the opinion that the patient/ substitute decision-maker understood the above information.

Name of Dentist: «provider.name»

Signature : _____

Date : «general.date»





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POST-OPERATIVE INSTRUCTIONS FOLLOWING TREATMENT OF EXTRACTION

*Always remember a clean and healthy mouth heals more rapidly than a neglected one.
The following steps will help prevent bleeding, and relieve soreness:*

On the day of the treatment:

- Rest a few hours, you do not have to lie down.
- Strenuous exercise is best avoided for a few hours.
- **Do not rinse the mouth for at least 4 hours.**
- Avoid **HOT** fluids, alcohol, and hard or chewy foods. Choose cool drinks and soft foods.
- Try not to smoke for at least 24 hours.
- Should the wound start to bleed, apply a small compress. This can be made from some cotton wool in a clean handkerchief. Place on the bleeding point, and bite on it for 5-10 minutes, longer if necessary.
- Taking painkillers such as Neurofen or Paracetamol can relieve any pain or soreness.
- If prolonged bleeding or pain occurs, contact your dentist.
- It will be beneficial to use Curasept antiseptic mouthwash to **gently** rinse your mouth out 6-7 hours after the extraction, a warm salt water rinse will also be helpful.

The day AFTER the treatment:

- Continue to gently rinse your mouth out using the antiseptic mouthwash.
- This may be carried out after each meal until the healing is complete. The solution should be held in the mouth for two to three minutes to bathe the wound and then be discarded. Avoid over-vigorous rinsing.
- Taking Nurofen or Paracetamol can treat continuing mild pain.

IF IN DOUBT PLEASE CONSULT YOUR DENTIST ON **0207 328 1200** OR ON THE EMERGENCY NUMBER **07866153496**