

Informed consent for dental crowns, veneers, implant crowns, or bridge prosthesis

Dear patient, you have the right to be fully informed about the dental procedure you are about to undergo. This includes a discussion of all risks, benefits, and potential consequences, as well as the cost, purpose of the treatment, and alternative options, including no treatment. This informed consent form is not meant to alarm you, but to help you make the best decision for your dental health. A crown or veneer is a covering placed over a tooth to protect it or improve its appearance and function. Crowns can be made from porcelain, composite, zirconia, metal, or a combination of these materials. A crown may also be attached to an implant and can be either cemented or screw-retained. Indications for a crown, veneer, or bridge include protection after root canal treatment, fractured or worn teeth, large existing restorations, aesthetic or functional concerns, replacement of missing teeth, implant restoration, and replacement of old or failing prostheses.

I, _____ consent to receive the following treatment: _____, to be performed by the Dentist, Dr._____. I understand that crowns, veneers, and bridges present certain risks and possible uncertain, unpredictable and/or unsuccessful results. Although I understand that great care and diligence will be exercised in the execution of my treatment, and that the Dentist will strive to ensure the best possible outcome, there are no promises or guarantees as to the anticipated results. I agree to assume the following risks:

Reduction of tooth structure: To properly place a crown, veneer, or bridge, the tooth must be reshaped to accommodate the restoration for optimal function and aesthetics. Preparation is performed as conservatively as possible while achieving the desired outcome. This does not apply to implant crowns.

Tooth sensitivity: After tooth preparation, sensitivity may occur for a short or extended period, even after the final prosthesis is placed. It often subsides, but if it persists, please notify the Dentist. Root canal treatment may be required. Teeth receiving crowns or bridges may have been previously compromised by trauma, decay, multiple restorations, or other conditions. As a result, or in combination with prior factors, the tooth may develop pulpitis or pulpal degeneration, leading to prolonged sensitivity, pain, or possible abscess formation. Root canal treatment may be necessary in these cases. In rare situations, additional surgery or extraction may be required. This does not apply to implant crowns.

Opening of interproximal contacts: When a final crown is placed on a tooth or implant, the contact with adjacent teeth is designed block food from getting stuck, but to allow floss to pass through. Over time, teeth can shift, causing these contacts to loosen or open. This may occur between natural teeth and crowns, and between natural teeth and implant crowns. Because implants are fixed to bone, open contacts are more common between an implant and a natural tooth, but can also occur between implants. Every effort will be made to prevent and address open contacts if they develop.

Breakage: The prosthesis may chip or fracture over time due to bruxism, parafunctional habits, changes in bite forces, trauma, oral hygiene, or diet. Damage may also develop gradually and become apparent years later. Issues related to laboratory error or defective materials typically present shortly after placement.

Uncomfortable/strange feeling: A difference in feel between natural and prosthetic teeth may cause temporary discomfort. Most patients adapt over time. In rare cases, gum inflammation, soreness, muscle tenderness, or TMJ symptoms may persist after placement.

Aesthetics: The colour of the prosthesis will be agreed upon prior to placement. Over time, the adjacent natural teeth can change colour, but the crown or bridge will remain the same, leading to an unaesthetic appearance.

Longevity: The lifespan of a crown or bridge depends on factors such as parafunctional habits, trauma, oral hygiene, diet, and regular dental care. A crowned tooth can still develop decay. For these reasons, no guarantee can be made regarding the longevity of any prosthesis.

Numbness or injury: Local anesthesia may cause pain, swelling, bruising, infection, jaw tenderness, or temporary numbness of the tongue, lips, teeth, jaws, or surrounding tissues. These effects are usually temporary but may rarely be permanent. Soft tissues around the prepared area may also be irritated or injured and, in some cases, may require sutures.

I acknowledge that I have been informed of the risks, benefits, and costs of the proposed treatment. I have had the opportunity to ask questions and understand the potential outcomes, including the possibility of referral to a specialist if needed. All information has been explained to me in a language I understand. I confirm that I have provided a complete medical history, including all conditions, medications (including non-prescription or recreational drugs), and allergies. I understand that withholding information may result in unexpected complications. I understand that smoking and poor oral hygiene may negatively affect healing and long-term outcomes. I also understand that additional or different conditions may be identified during treatment, and I authorize the Dentist to provide any necessary care based on their professional judgment. I agree to follow all post-operative instructions and understand that it is my responsibility to seek follow-up care if any concerns arise.

Patient's or legal guardian's signature

Date

Witness's signature

Date

Dentist's signature

Date