

Patient: \_\_\_\_\_

## Explanation of Risks

Similarly, as with medical treatment, dental treatment also requires your consent. The dentist plans your treatment options based on his findings and experience. In some cases, more than one option is available to the patient. Please ask the dentist or his/her assistant, if you would like a more detailed explanation in order for you to make an informed decision.

### Possible complications

The following information refers to everyday dental procedures, which you may have already experienced during previous dental treatment. For more involved procedures (e.g. surgical treatment) risks should be explained separately and in greater detail. No physician can guarantee the success of his/her treatment. Every effort is made to ensure the success of treatment, however, if failure of treatment is caused by the patients failure to follow post operative instructions, or the treatment fails due to the individuals own biological problems the patient is still liable for all costs.. Despite every effort by the dentist, when confronted with unfavorable circumstances, complications can occur. The most important are below specified.

#### 1. Cooperation/Behavior of the patient

Any treatment can lead under unfavorable conditions (caused by the lack of cooperation or behavior of the patient) to failure of the treatment. In particular

- existing incompatibility / allergy
- metabolic situation / pregnancy / infection / diabetes / rheumatism / blood illness / heart cycle disturbances
- tobacco, alcohol, certain medicines
- lack of co-operation and unreliability: Poor oral hygiene, failure to attend appointments, frequent cancellation of appointments without re-scheduling
- bruxism causing damage to treated teeth, gag reflex.

#### 2. Fillings/Preparation of teeth for prosthetics

Depending upon the depth of the decay/caries and according to the amount of remaining tooth structure for a tooth preparation, the tooth can become much more or less sensitive to stimulants such as hot, cold, and sweet, or to pressure following treatment, which will usually diminish by itself after some time. In exceptional cases particularly with very deep decay/caries, pain can be caused by an acute inflammation of the tooth nerve due to the death of the tooth nerve: In most cases the tooth can be saved by a root canal treatment.

#### 3. Root Canal treatment

A root canal treatment is usually the last attempt at tooth preservation. During the treatment a fine root canal instrument can break off inside the canal or perforate the root. There is also the possibility that root filling material could extrude beyond the apex of the root into surrounding tissue and (very rarely) into the sinus or the nerve canal). Following treatment for the existing problem, an acute chronic inflammation can occur. This can sometimes cause swelling or, rarely, an incompatibility reaction to the root canal filling material. The reasons specified above make tooth isolation necessary by the use of Rubber Dam. A root-canal

treated tooth has a far higher risk of breakage due to its lack of blood supply, and can in addition cause a related illness.

#### 4. Local Anaesthesia/Injection

If the treatment is expected to be painful, numbness of the area is usually accomplished by the use of local anesthetic. In extremely rare cases nerves or blood vessels can be damaged during injection. The resulting numbness usually regresses. Serious incompatibility reactions and hypersensitivity reactions to the anesthetic are extremely rare involving the heart, its rhythm and the central nervous system. In rare, acute cases pain elimination cannot be fully attained and the numbing effect may only be partial.

#### 5. Accidental injuries

When performing treatment, especially procedures involving the use of drills and sharp dental instruments and also when faced with the reflexive movements of the patient, accidental trauma of the mucous membranes and (more rarely) of bone and nerve tissues can occur. These conditions are usually harmless and heal without intervention. Likewise, damage to tooth structure, fillings and existing dentures is also possible.

#### 6. Surgical Treatment

With all surgical treatment (e.g. tooth extraction), an injury to the mucous membrane, bone or vessels, can lead to the inflammation and more rarely to general blood poisoning. As a rule all inflammation (infections) can be controlled well by topical medication and if necessary by systemic medication (e.g. antibiotics). General illnesses (e.g. diabetes), infections and smoking/alcohol can discourage healing of the wound and encourage bleeding. Nerve irritation and damage are rare. Bleeding and postoperative hemorrhages usually stop quickly by the use of local treatment measures. Serious complications are rare, but can arise however, in the case of haemophilia (blood clotting disturbance).

#### 7. Ingestion/Inhalation of foreign bodies

During treatment to extract a tooth, a root canal filling, or to fill a tooth, a small instrument or the like can be swallowed or inhaled. In the first case monitoring the situation is usually sufficient. However, if foreign bodies are inhaled, serious complications can develop under unfavorable circumstances. Usually, the object can be removed by a physician specializing in Bronchoscopy or Gastroscopy.

#### 8. Effects of medication on your driving ability

Pain medication, calming tablets, and local anesthetic injections impair safety and reaction times while driving. Therefore, no motor vehicle or bicycle should be driven if you received such tablets or injection during your treatment. Machinery should also not be operated. This advice is valid for a period of 3 - 4 hours after ingestion of the medicine and/or injection.

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Date:

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Signature Patient