# **Informed Consent for Orthodontics**

Congratulations on your decision to pursue orthodontic treatment. We are confident that the outcome will be well worth your investment! We look forward to working with you to achieve the best result possible. Success depends on keeping your appointments, meticulous oral hygiene and faithfully wearing all appliances as directed.

First you'll see a hygienist or certified dental assistant to have x-rays, photos and impressions made. These diagnostic records will be used to study your case and formulate your treatment plan, a custom made plan that incorporates currently available techniques and technology to treat your case in the most efficient way. The cost of the case study is \$350. When the case study is done we set up a visit or talk by phone to present you with the details of your treatment plan. If you are uncomfortable with our treatment plan, this would be the time to see another provider for a second opinion. It's important that you understand the treatment plan and have confidence in your provider before you start treatment. In orthodontics there is more than one way to treat a case well and different providers will vary in their treatment methods.

We can accept about 90% of the cases that present to us. A smaller number of cases are complex and require an orthodontist, a dentist who specializes in orthodontics. Dr. Ed Gracza is not an orthodontist, but is a general dentist. However, he has completed many hours of course work and study in orthodontic techniques, has treated about 200 children and adults and has 20 years of experience. If you would rather be treated by an orthodontist we make it clear now that it's certainly your right. **All you have to do is ask and we will refer you to an orthodontist.** Also, if we study your case and discover it is too complex for us we will forward your records to the orthodontist of your choice and there will be no charge for the case study.

We offer treatment with conventional appliances (metal "braces") or clear aligners. Technology is rapidly improving the effectiveness of clear aligners as an alternative to metal braces. Many but not all cases can be treated with aligners. The advantages of aligners are invisibility, ease of oral hygiene and removability. The disadvantages of aligners are significantly higher cost and a lack of effectiveness if the aligners are not worn as prescribed. Aligners are custom made from 3D computer files by companies such as Invisalign  $_{(R)}$  and

# ClearCorrect<sub>R</sub>

If you decide to undergo treatment with us, we'll schedule a visit to have appliances placed, receive the first set of aligners or extract teeth if necessary. At this visit we require you to pay the full cost of treatment. If you qualify, payment plans are available through Care Credit<sub> $\mathbb{R}$ </sub>. You can apply and undergo the approval process for Care Credit at our facility which usually takes about 15 minutes. In rare

cases we will arrange a payment plan directly with you which requires a down payment of 1/3 of the fee. The balance is divided into the number of monthly payments equal to the estimated treatment time so that the balance is paid off near the time you finish. If you have dental insurance that covers orthodontic services we will process your claims.

After active treatment is completed, the appliances are removed and fixed retainers are placed. These are tiny wires bonded to the back sides of the upper and lower teeth. Clear removable retainers are also provided to be worn at night for 18 months. These retainers are often lost or damaged. We will provide two (2) replacement removable retainers free of charge. After that there is a \$105 fee for each replacement retainer.

We want you to understand the following inherent risks and limitations of orthodontic treatment.

#### Oral hygiene

Taking care of your teeth at home while wearing braces is very important. If you eat a lot of sweets, drink a lot of pop and don't brush while in braces you will develop cavities around the brackets and bands. Cavities are preceded by white spots which are a decalcification of the dental enamel. *We reserve the right to remove the braces and discontinue treatment if poor oral hygiene begins to cause decay and swollen gums.* 

### Loss of Vitality

The nerve of a tooth can be damaged from a number of causes, one of them being the force applied to cause tooth movement. If this happens root canal therapy will be necessary to treat the damaged nerve.

### Headgear

Head gear straps can snap back and cause injury. Although they have safety release modules, injury is still possible. Be careful and follow instructions.

#### **Root Damage**

Forced tooth movement is one of the several causes of root resorption which manifests as shortening and blunting of the root tips. These teeth usually do not cause symptoms and function normally. There is also the rare possibility of moving teeth off the supporting bone which may result in loss of the tooth.

Karlstad Dental Clinic ◆ 223 South Main St ◆ Karlstad, MN 56732 ◆ 218.436.2944 ◆ <u>kdc@wiktel.com</u> Roseau Dental Clinic ◆ 903 3<sup>rd</sup> St NE Suite "A" ◆ Roseau, MN 56751 ◆ 218.450.2944 ◆ <u>rdc@wiktel.com</u>

# Temporary Anchorage Devices (TADs)

TADs are tiny screws placed in the jaw bone that serve as anchors to move teeth. They are placed in the office under local anesthesia by your dentist or an oral surgeon. TADs have come into wide use in orthodontics. They greatly increase the efficiency and precision of tooth movement. TADs are very carefully placed with the guide of xray images and complications are rare. However, complications such as damaged roots, damaged nerves, numbness and infection can occur. TADs occasionally become loose during treatment and need replacement. Rarely the screw breaks during placement, in which case the broken fragment is often left in place.

#### **Impacted Teeth**

In attempting to move impacted teeth, especially cuspids, various problems are sometimes encountered which may lead to tooth loss or periodontal (gum) problems. The length of time required to move such a tooth can vary considerably.

### **Joint Problems**

The jaw joints can be affected by orthodontic appliances. Your dentist will consider this when developing your treatment plan. TMDs, or temporomandibular disorders, are syndromes of joint pain. TMDs are complex and their causes are controversial. Depending on the case, they can be either helped or exacerbated by orthodontic appliances.

# **Open Bite**

An often undesirable side effect is a space between the upper and lower front teeth that develops over the course of treatment so that the person cannot close all the way together with the front teeth. Some people have a bone structure and growth pattern that make them very vulnerable to this. Also when planning a person's treatment, the extent and pattern of jaw growth cannot be perfectly predicted. After the growth is complete, a decision is made whether to leave it or to have it surgically corrected.

# **Retention and Relapse**

Retention is the inactive phase of treatment that begins when the braces are removed and retainers are placed. Retainers are wires bonded to the teeth and clear removable plastic appliances that are worn for a prescribed period of time. They are placed to prevent relapse, the movement of teeth back toward their original positions. *The tendency to relapse decreases with time but some of it remains indefinitely. Therefore there is no guarantee that your teeth will stay in position when the braces are removed. This is a limitation of orthodontics that can be minimized with retainers but not completely eliminated. This is why bonded retainers need to stay on for 7 or more years and why the removable retainers must be worn over them at night as prescribed. The wearing of retainers is critical. The cost of additional treatment to correct relapse is not included in the initial estimate.* 

#### **Swollen Gums**

Swollen, inflamed and bleeding gums can be prevented by regular brushing, flossing and use of the special oral hygiene aids provided. Swollen gums make it difficult for us to see and place the wires and ligatures. Swollen gums are tender making a simple wire change into a painful experience. Regular dental checkups and cleanings should continue while braces are on.

Treatment success depends on you as much as it does on us. Our job is to provide you with the professional standard of care to the greatest of our ability. By signing this statement you acknowledge that your job is to keep your appointments or call in advance to change them, to devote yourself to excellent oral hygiene, to follow the dentist's instructions and to make your payments in full and on time. We reserve the right to remove appliances and stop treatment if the payment terms are not met.

I fully acknowledge and agree to the terms and expectations as stated above. I consent to photographs and x-rays before, during and after treatment, and to their anonymous use along with any clinical information in regard to my case for use in scientific papers, and to its disclosure as needed to other providers and educational institutions for the purposes of education and the development of my treatment plan. I give my consent to Dr. Ed Gracza, a general practitioner, to perform comprehensive orthodontic treatment for me or my child. I certify that I have read or had read to me the contents of this form and do realize the risks and limitations involved and that the option of treatment by an orthodontist was given to me as an alternative.

data

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Signature of Parent or Legal Guardian; patient signs if age 18 or over	
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	_date
Witness	

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# **Preorthodontic History**

Patient name				Age		
Please indicate if the	re has	s been any histo	ory of the fo	ollowing:		
Serious injury to the h	ead of	r face	Yes	No		
Injury to the jaws			Yes	No		
Tonsils removed			Yes	No		
Adenoids removed			Yes	No		
Pain in the jaw joint			Yes	No		
Received speech thera	py		Yes	No		
Previous orthodontic o	1 2	ltation or treatm	ent Yes	No		
If yes, when?						
Habits:						
Thumb sucking	Yes	No	Мс	outh Breathing	Yes	No
	Yes	No		nding of teeth		No
1 0	Yes	No		C		
Oral Hygiene Habits	:					
How often are the teet	h brus	shed?				
How often are they flo	ossed?					
Child's interest in tre	eatme	ent:				
Wants braces		Reluctant		Uncooperative		
What is the primary re	ason	for seeking orth	odontic care	?		
			Signa	ture of respon	nsible	party