

Sandra W. Gibson DDS

INFORMED CONSENT FOR CROWNS, ONLAYS, INLAYS OR BRIDGES

Teeth generally need crowns, onlays and inlays to add strength and prevent breakage of the underlying tooth.

Why do you need a crown, onlay or inlay?

Your tooth may have any of the following problems: excessive decay, existing fracture lines, breakage, faulty existing crown, existing root canal, unsightly fillings, large existing filling, or you may have a missing tooth and need a bridge.

Expectation of treatment:

Preparing a tooth for the restoration requires one or two visits. At the first visit, Dr Gibson prepares the tooth by removing any decay or faulty fillings and by removing some of the tooth structure. The tooth may need a build-up to replace missing tooth structure. Often, this can't be determined until the old crown or filling is removed and the remaining tooth is evaluated.

Gold Crowns or Bridge:

Impressions will be taken and a temporary crown will be made to protect the tooth while the permanent crown is being made at the lab. A second visit will be scheduled to seat your permanent crown, onlay, inlay or bridge. The restoration will be fitted and cemented at that point. Occasionally a restoration will be returned to the lab to make minor adjustments and will require a third visit.

Porcelain Crowns:

For porcelain crown, images of the tooth will be scanned into the computer and the crown will be fabricated in the office. All attempts will be made to seat the permanent crown the same day.

Possible Complications:

Any tooth needing a crown, onlay, inlay or bridge always hold the possibility that the pulp has been irritated by pre-existing conditions. The tooth may become sensitive to cold, heat or chewing and you may need to return for an adjustment. There is a chance the tooth will subsequently need root canal therapy if these pre-existing conditions are present. This is impossible for the dentist to predict. A crown lengthening procedure may be indicated if minimal tooth structure remains after decay has been removed. Also, more tooth removal may be recommended if a crack is seen in the tooth during preparation. A tooth may need to be removed if there is not adequate retention for a good prognosis.

Other possible complications are TMJ dysfunction, nerve damage and subsequent numbness, difficulty eating, sore muscles, and swallowing or aspirating the restoration. These are unusual

X _____
initial

circumstances and are rare. Additional medical and dental risks that have not been mentioned may occur.

Porcelain is made from glass and can possibly fracture. If you clench or grind your teeth you should inquire about wearing a night guard so you do not break the tooth. We guarantee our porcelain restorations from fracture for one (1) year, and then the cost is prorated for two (2) years.

I _____ (patient's name) have been given the opportunity to ask questions about my condition and any risks, benefits and alternatives available. I certify that I have read or have had read to me the contents of this consent form and do realize the risks and limitations involved and do consent to treatment.

I give permission for my photos to be used by Dr. Gibson for education purposes.

Please circle one: Yes / No

Signature

Date

Procedure to be performed today: _____