



The Hub Dental Practice

Informed Consent for Bridges



This consent form should be read in conjunction with the consent forms for Root Canal, Tooth Reduction, Gaps & Spaces, and Implants.

1. Type of restoration:

There are various types of Bridges, for example some restorations involve more tooth destruction, some are stronger than others, some have better cosmetic results. The choices are outlined in the Bridge Leaflet that you have been given. It gives the types eg all ceramic and mixed metal/ceramic. It gives their advantages and disadvantages.

It is important that you read this and understand the choices etc before you make your decision.

2. Reduction of tooth structure:

This consent form should be read in conjunction with the consent forms for Tooth Reduction.

3. Bridged teeth may require root canal treatment and may be sensitive after treatment:

This consent form should be read in conjunction with the consent forms for Root Canal.

4. Breakage:

Bridges may possibly chip or break. Many factors could contribute to this situation such as chewing excessively hard materials, changes in biting forces, trauma to the mouth, etc. Unobservable cracks may develop in Bridges from these causes, but the Bridges may not actually break until chewing soft foods or possibly for no apparent reason. Breakage or chipping seldom occurs due to defective materials or construction unless it occurs soon after placement. In general terms the Bonded Bridges are less likely to fracture/break than All Porcelain ones. All Porcelain Bridges though having a better cosmetic appearance are more prone to fracture/break.

5. Esthetics or appearance:

Patients will be given the opportunity to observe the appearance of Bridges in place prior to final cementation. It is understood that while an effort will be made to match the new restorations to existing tooth colour when appropriate, it may be extremely difficult or impossible to achieve an exact match and a difference may be noticeable.

6. Longevity of Bridges:

There are many variables that determine how long Bridges can be expected to last. Among these are some of the factors mentioned in preceding paragraphs. Very important are also general health, regular checkups and diet. Patient must understand that Bridge treatment does not make the remaining tooth/teeth immune to additional dental disease, and that proper hygiene, including brushing and especially interdental cleaning, good diet and regular dentist and Hygienist appointments must be maintained to prevent this occurrence.

7. Alternative Options:

There are several alternatives to bridges, including no treatment. Each choice has advantages and disadvantages, possible complications etc. We have various leaflets and other information to help patients decide their choice. It is essential that patients make an informed decision so if you need more information we always suggest a delay in starting treatment.

8. Changes to treatment plan:

Treatment plans are developed based on information available from radiographic and intraoral examination. While every effort has been made to produce a complete and comprehensive treatment plan, situations may arise where while treatment is being performed; additional findings may be observed which necessitate changes to existing treatment plans. It is understood that treatment rendered up to the point when changes occur are the responsibility of the patient, whether or not previous treatment would have been necessary in light of new findings. Furthermore, before starting treatment, patient recognizes and accepts this possibility.

It is a patient's responsibility to seek attention from the dentist should any undue or unexpected problems occur. The patient must diligently follow any and all instructions, including the scheduling and attending of all appointments.

Failure to keep the cementation appointment can result in ultimate failure of the Bridge to fit properly and an additional fee may be assessed.

Bridge should be considered a temporary solution and will need replacement several times during a normal lifetime. The cost of replacement and/or recementation is not included in the cost of providing the Bridge. Future extra charges will apply.

Patients must understand that treatment of dental conditions requiring Bridges includes certain risks and possible unsuccessful results, and with eventual failure. I agree to assume those risks, possible unsuccessful results and/or failure associated, but not limited to the following: (Even though care and diligence is exercised in the treatment of conditions requiring Bridges and fabrication of the same, there are no promises or guarantees of anticipated results or the longevity of the treatment).

Signing this Informed consent form is an acknowledgement that the dentist has explained the various options for treatment/restoration, including the options of delaying treatment or no having no treatment at all and/or to seek a second opinion.

In addition it is an acknowledgement that we have given you a leaflet on Bridges that explains the choices of materials and that the choices, their advantages and disadvantages, risks etc have been explained to my satisfaction.

No guarantees or promises have been made to me concerning the results. The fee(s) for services have been explained to me and are satisfactory. I hereby consent to the proposed dental treatment and acknowledge that it is being provided as a private patient.

(CF Bridges)

Name of Patient : _____

Date of Birth:- _____

Signature : _____

Date : _____