CONSENT FOR EXTRACTION/SOCKET PRESERVATION BONE GRAFTING

RECOMMENDED TREATMENT: After a careful oral examination and study of my dental condition, Dr. Yaholnitsky has advised me that a tooth, or several teeth, should be extracted (pulled). Local anesthetic will be administered as part of doing the extraction. Bone grafting will be done to preserve the bone contour.

SURGICAL PHASE OF TREATMENT: I understand that sedation may be utilized and that a local anesthetic will be administered to me as part of the treatment. My gum tissue will be opened to expose the teeth and bone. The hopeless tooth will then be removed as atraumatically as possible to try and preserve the existing boney socket. The procedure may involve the sectioning of the tooth and localized reduction of bone to get access to the roots. The socket may then be filled a bone grafting material (discussed below) and covered with a barrier membrane (discussed below) to promote healing.

The soft tissue will be stitched as closed to closed as possible over the socket. Healing will be allowed to proceed for a period of six months before placement of a dental implant.

I understand that if during surgery, clinical conditions turn out to be unfavorable the procedure may need to be cancelled.

EXPECTED BENEFITS: The purpose of the socket preservation procedure it to allow for the proper form and volume of the bone ridge to develop. This would allow for proper esthetics and/or future placement of dental implants.

PRINCIPAL RISKS AND COMPLICATIONS: Complications that may result from surgery could involve the surgical procedure, bone regenerative materials, drugs, or anesthetics. These complications include, but are not limited to post-surgical infection, bleeding, swelling, pain, facial bruising, jaw joint pain or muscle spasm, cracking or bruising of the comers of the mouth, restricted ability to open the mouth for several days or weeks, impact on speech, allergic reactions, accidental swallowing of foreign matter, and transient (on rarest of occasions permanent) increased tooth looseness, tooth sensitivity to hot, cold, sweet or acidic foods, and transient (on rare occasions permanent) numbness of the jaw, lip, tongue, chin or gums. A dry socket can cause pain for about a week. *Extracted teeth that are not replaced may lead to the other teeth moving or drifting, creating spaces between the remaining teeth and making it difficult to impossible to replace them or straighten them later.* The exact duration of any complication cannot be determined, and they may be irreversible

ALTERNATIVES TO SUGGESTED TREATMENT: N	No extraction(s) or
extraction(s) without socket preservation.	
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NECESSARY FOLLOW-UP CARE AND SELF-CARE: It is important for me to continue to see my regular dentist for routine dental care and to get the missing tooth/teeth replaced as recommended.

Smoking may adversely affect extraction site healing and may cause a dry socket (very painful for about a week). Smokers have more dry sockets than non-smokers. Dry sockets means a failed bone graft.

I have told Dr. Yaholnitsky about any pertinent medical conditions I have, allergies (especially to medications) or medications I am taking, including over the counter medications such as aspirin.

I need to come back in for several post-operative check-ups so that healing may be monitored and so Dr. Yaholnitsky can evaluate and report on the outcome of surgery to my dentist.

I know that it is important to:

- 1. Abide by the specific prescriptions and instructions given.
- 2. See Dr. Yaholnitsky for post-operative check-ups as needed.
- 3. No smoking or using smokeless tobacco for 2 weeks.
- 4. Have any non-dissolvable sutures (stitches) or barriers removed.
- 5. Get the tooth/teeth replaced as recommended.

BONE GRAFT MATERIALS FOR SOCKET PRESERVATION: Many times bone grafting is done at the time of extraction. The source of bone graft material is from human organ donors processed in accordance with FDA regulations thru FDA approved commercial bone banks/processors. Sometimes sterile, medical grade calcium sulfate (plaster) is mixed with the bone. Plaster is inert (no rejection reaction) and resorbs completely in 8 weeks, so is a good source of extra calcium content for getting a successful bone graft. A covering is placed over the bone graft, either a non resorbable (needs to be removed in about 4 weeks) man-made thin teflon mesh (commonly called a teflon barrier) or a medical grade, resorbable sterile collagen mesh (commonly called a collagen membrane or collagen barrier) in a mesh form derived from bovine (cow) Achilles tendon. The purpose of the barrier is to keep the bone graft material in place.

NO WARRANTY OR GUARANTEE: While in most cases tooth extraction heals quickly and with out any problems, complications such as those listed previously, can happen despite the best of care.

PUBLICATIONS OF RECORDS: I authorize photos, slides, x-rays or any other viewing of my care and treatment during or after its completion to be used for either the advancement of dentistry or in promotional materials. My identity will not be revealed to the general public.

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CONSENT TO HAVE TOOTH EXTRACTION(S)! SOCKET PRESERVATION BONE GRAFTING

I have been informed of the nature of my dental problem, the procedure to be utilized, the risks and benefits of having this extraction oral surgery, the alternative treatments available, the necessity for follow-up and self-care, and the necessity of telling Dr. Yaholnitsky of any pertinent medical conditions and prescription and non-prescription medications I am taking. I have had an opportunity to ask questions. I consent to the performance of the extraction oral surgery as presented to me during my consultation and as described in this document above. I also consent to the performance of such additionalor alternative procedures as may be deemed necessary in the best judgment of Dr. Yaholnitsky. I have read and understand this document before I signed it.

Date [Printed name of patient, parent or guardian]

[Signature of patient, parent or guardian]

Date [Printed name of witness]

[Signature of witness]