

**Patient Name** \_\_\_\_\_

**I approve of this treatment.**

Yes, I understand and approve of the recommended dental treatment for my child. I have discussed the treatment goals and expectations with the dentist, and my questions have been answered. I may request a copy of this consent form if I wish.

**White dental fillings:** This involves physically removing bacteria and infected tooth structure, and replacing any lost tooth structure with a bio-compatible white filling. Fillings return the teeth to normal form and function, but they have limits. Fillings are not as strong as natural tooth structure, and it is possible they can eventually crack, become worn, or dislodge. This is more likely for people who grind their teeth, or eat very hard foods. After fillings, it is still possible to grow new cavities on other parts of the tooth, requiring future care. Some teeth can develop sensitivity after a filling. Parent Initials \_\_\_\_\_

**Dental crowns:** A crown is a tooth-shaped shell that completely covers a tooth. Because of their high strength, crowns are recommended when the structural integrity of a tooth has become weak. Crowns can dislodge, or become worn. New cavities or infections can develop under crowns in some situations. Some teeth can become sensitive after a crown is placed. Blue Whale offers two materials of crowns: ceramic glass, and surgical-grade stainless steel:

- **Ceramic glass (zirconia)** contains no metal, and this is the most bio-compatible choice. Ceramic crowns require certain clinical conditions involving the gums and teeth, and are not always an option. Ceramics are more expensive than steel. Parent Initials \_\_\_\_\_
- **Stainless steel** crowns are durable and can be placed in more clinical situations than ceramics. They are not esthetic. They contain no mercury. Parent Initials \_\_\_\_\_

**Local Anesthetics** A local anesthetic may be injected into the gums or cheeks to increase my child's comfort. The numbing effect typically lasts 2 hours to 4 hours. During this time, my child may be tempted to chew or play with the numb lips or cheeks. After the appointment, I will insure that my child is monitored by a responsible adult, because self-inflicted bites or wounds can be severe and scarring. Allergic reactions to anesthetics are rare, but possible. Long-term numbness is possible with certain types of numbing techniques. The sites where anesthetic is injected may develop small (3mm) temporary bruises on the inside of the mouth and gums that may take several days to heal. Parent Initials \_\_\_\_\_

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**Pulp Therapy (pulpotomy, pulpectomy)** When a bacterial infection goes into the nerve & blood supply located in the core of a tooth, pulp therapy is an attempt to catch and stop the infection from spreading further into the tooth or gums, and rest of the body. The process involves physically cleaning the inside of the tooth, and removing bacteria and inflamed tissue. This process may involve micro-electrical cauterization to disinfect the inside of the tooth before placing a biocompatible filling material made of medical grade zinc oxide & medical grade clove oil. Not all dentists perform pulp therapy with the same technique, or with the same medications/agents. It is possible that after pulp therapy, new or repeat infections can return to the core of tooth, and additional treatment may be necessary. Parent Initials \_\_\_\_\_

**Extraction** If a tooth is severely infected, or based on the particular growth & development of a child, early extraction of a tooth may be recommended. It is possible that tooth roots may crack or break during extraction, and root tips may be left for the body to resorb naturally. Extraction involves bleeding, and a possibility of infection, so it is important that parents communicate any bleeding or immune system disorders. Sutures are sometimes but not typically needed. Parent Initials \_\_\_\_\_

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**All procedures:** Although Blue Whale maintains a happy and child-friendly environment, I understand these dental procedures can be of a serious surgical nature. I agree to play a supportive role to assist the dentist in delivering safest and highest quality care to my child. Communication about concerns and teamwork is always welcome before a restorative or surgical appointment, but during an actual procedure, the dentist will remain focused on the safety and wellness of my child.

The dental team cares for the safety of my child, yet any procedure has the potential for inadvertent abrasions, wounds, or pokes to tissues in or around the mouth from dental instruments, handpieces, and syringe needles. There is a risk of aspiration of foreign materials used in procedures. These risks are increased if patient behavior is uncooperative.

The dental office may attempt to process and submit dental claims to my insurer, on my behalf. I understand that estimated insurance payments are often different from actual payments, and ultimately I am responsible for any eligible charges not paid by the insurance plan I have independently selected for my family. As a subscriber, I have the ability to contact and verify my benefits directly with my own insurer. Insurance transactions submitted by an office often take weeks or several months to fully process.

I understand and approve of this dental care for my child.

Parent Name \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_