

General Consent

Thank you for choosing our office for your dental care. We will work with you to help you achieve excellent oral health. While recognizing the benefits of a pleasing smile and teeth that function well, you should be aware that dental treatment, like treatment of any other part of the body, has some inherent risks. These are seldom great enough to offset the benefits of treatment, but should be considered when making treatment decisions.

Benefits of dental treatment can include: relief of pain, the ability to chew properly, and the confidence and social interaction that a pleasing smile can bring. Nonetheless, there are some common risks associated with virtually any dental procedure, including:

1. **Drug or chemical reaction:** Dental materials and medications may trigger allergic or sensitivity reactions.
2. **Local anesthetic:** I understand that the administration of local anesthetics may cause an untoward reaction or side effects, which may include, but are not limited to, bruising; hematoma; cardiac stimulation; muscle soreness; and temporary or rarely, permanent numbness. I understand that occasionally needles break and may require surgical retrieval.
3. **Muscle or joint tenderness:** Holding one's mouth open can result in muscle or jaw joint tenderness, or in a predisposed patient, precipitate a TMJ disorder.
4. **Sensitivity in teeth or gums, infection, or bleeding:** After fillings, crowns, bridges, root canal therapy or extractions.
5. **Swallowing or inhaling small objects.**
6. **The choice of different dental materials:** ie: amalgam, tooth color composite or gold. The pros and cons of the above.
7. **Photography:** I understand that the use of dental photography as a diagnostic tool and to reduce liability issues is a necessity in the practice of dentistry. I therefore give my consent to Dwayne Hall Dentistry to use my photographs for demonstration and educational needs.

While we follow procedural guidelines which most often lead to a clinical success, just like in any other pursuit in health care, not everything turns out the way it is planned. We will do our best to assure that it does. Please feel free to ask questions in regard to all dental procedures that are recommended to you.

I have read and understand the statement on this page:

Patient's Name (please print)

Patient's Signature

Date

Parent's Signature (if minor patient)

Date