

CANDIDATE INFORMED CONSENT

(Teeth Whitening)

GENERAL DESCRIPTION

The amount of whitening varies from one person to another and can not be predicted or guaranteed. But in general;

- 1 Yellow or brown teeth, extrinsic stains and darkened monochromatic teeth are easier to whiten.
- 2 Grey or bluish teeth and striated or splotch teeth are more difficult to whiten.
- 3 The Whitening System is a procedure, designed to whiten teeth that are being maintained with proper oral hygiene.

CANDIDATES FOR TREATMENT

Generally just about anyone who wants their teeth whiter, however;

- 1 People with significant periodontal disease are not candidates.
- 2 People with fillings that may be breaking down, with cavities in their teeth, or with chipped or worn teeth may be better treated by restorative procedures first.
- 3 Pregnant women, should obtain permission from their doctor before whitening.
- 4 Heavy smokers should discontinue the use of tobacco before whitening.

RISKS

- 1 Peroxide solutions have been available for many years as an antiseptic in the mouth and it widely used for its effect on teeth whitening.
- 2 If tooth sensitivity develops, Fluoride Home Care Gel may be recommended in reducing sensitivity. If sensitivity persists for more than 12 hours or is severe, contact your dentist.
- 3 Temporary inflammation of and or white spots on your gums, can be caused by the Whitening Procedure. This too should resolve within 12 hours, if it persists contact your dentist.
- 4 If you have fillings that are breaking down, decay in your teeth, erosions of the teeth or exposed root surfaces, due to periodontal disease, the peroxide may have direct access to the vital tissues of the teeth. Such access by the peroxide may cause tooth sensitivity. Such conditions need correction, prior to the whitening procedure, please inform your dentist.
- 5 The Whitening Procedure, can be very effective at whitening the teeth, but will not change the colour of fillings or crowns already in your teeth. For esthetic reasons, such fillings may need changing after the whitening procedures.

RESPONSIBILITIES

- 1 Avoid the use of tobacco, tea, coffee and teeth staining foods such as tomato paste and dark green vegetables for 2 days after the Whitening Procedure.
- 2 Never place household or commercial bleaches in your mouth.
- 3 Keep your recall appointments with your dentist.

GUARANTEES

- 1 There are no guarantees as to the degree of whitening of your teeth.
- 2 The amount of whitening varies with the individual.
- 3 Additional whitening sessions and the use of ancillary whitening systems, may be required, to obtain desired results.

CONSENT

- 1 I consent to photographs being taken. I understand, they may be used for record documentation and for illustration of my treatment.
- 2 The risks and benefits, have been explained to me, and I understand them.
- 3 I have had the opportunity to ask questions, and my questions have been answered.
- 4 I have read the above information, I consent to treatment and I assume the responsibility for the risks described above.

(Candidate)* _____
(Address)

(Signature)

(Professional)* _____
(Signature)

(Witness) _____
(Signature)

(Date) / /

* Professional means the principle of the business/surgery
Candidate means the person undergoing the whitening procedure