

Infinity Dental
8940 W. Tropicana Ave
Las Vegas, NV. 89147
702-248-4448

Crown and Bridge:

Patient Name: _____ **Date:** _____

Crown/Bridge #(s): _____ **Shade:** _____

I have been advised of and understand that treatment of dental conditions requiring crowns and/or fixed bridge work includes certain risks and possible unsuccessful results- including failure. I further understand that even though care and diligence is exercised in the treatment of my conditions and fabrication of my prosthetics, there are no promises or guarantee of anticipated results and/or longevity of the treatment. I agree to assume the risks associated with include but are not limited to the following:

- **Reduction of Tooth Structure:** I understand that to replace decayed or otherwise traumatized teeth, it is necessary to modify the existing tooth or teeth so that crowns and/or bridges can be placed on them. Tooth preparation will be done as conservatively as practical.
- **Numbness Following use of Anesthesia:** In preparation of teeth for crowns or bridges, anesthetics are usually needed. As a result of the injection or use of anesthesia, there may be swelling, jaw muscle tenderness or even a resultant numbness of the tongue, lips, teeth, jaws and/or facial tissues that is usually temporary; in rare instances, such numbness may be permanent.
- **Sensitivity of Teeth:** Often, after the preparation of teeth for the reception of either crowns or bridges, the teeth may exhibit sensitivity. It may be mild to severe. This sensitivity may last only for a short period of time or for much longer periods.
- **Crowned or Bridge Abutment Teeth May Require Root Canal Treatment:** After being crowned, teeth may develop a condition known as pulpitis or pulpal degeneration. It may be necessary to do root canal treatments on the affected teeth. If teeth remain sensitive for long periods of time following crowning, root canal treatment may be necessary. Infrequently, the tooth or teeth may abscess or otherwise not heal, which may require root canal treatment, root surgery or possibly extraction.
- **Longevity of Crowns and Bridges:** Many variables determine how long crowns and bridges can be expected to last. Among these are some of the factors mentioned in the preceding paragraphs, including the general health of the patient, oral hygiene, regular dental checkups and diet. It is imperative that you do NOT eat chewy and/or hard candy as this will often break the bond of cement and cause the crown to come off. As a result, no guarantees can be made or assumed to be made regarding the longevity of the crowns or bridges. At Infinity Dental we will warranty our crown/bridge work for 2 Years following Cementation. Following the 2 years any repair/replacement required will be completed at half-price for a total of 5 years from cement date.
- **Care and Maintenance of a Temporary Crown/Bridge:** After the preparation of the crown/bridge patients will be placed in a temporary crown/bridge. While gentle care is required during this temporary phase the tooth/teeth included must still be hygienic and well cared for. Temporaries may come lose or break and it is the patient's responsibility to immediately contact our office to have the temporary re-cemented or remade. It is further understood that failure to return for the permanent restoration and/ or wearing a temporary crown/bridge for too long includes multiple

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risks including but not limited to: recurrent decay of the existing tooth structure and loss of build up material and/or posts, fracture and loss of the tooth, re-infection of the pulp canal and/or associated draw structures (which could render further bone loss), malocclusion which could lead to future TMJ Problems, and halitosis (bad breath). Compromise to the initial preparation caused by failure to return that results in the remake or re-preparation of a crown/bridge will be the patient's financial responsibility.

Aesthetics or Appearance: I have been given the opportunity to suggest (and have discussed) my expectations for the appearance and aesthetics of my permanent crown/bridge. I have chosen and agreed to the shade listed above. I understand that after the preparation visit of my crown/bridge I CANNOT make changes to the aesthetics/appearance, and if I chose to require changes after this date I am responsible for the costs associated. I understand I will be given the opportunity to observe the appearance of the crown or bridge in place prior to final cementation.

Please express any concerns/suggestions you have for the look, shape, shade or feel of your permanent crown/bridge here: _____

X _____ Date: _____

Patient Signature (Prep-Date)

Consent to Deliver:

I have been given the opportunity to observe the appearance of the permanent crown/bridge prior to cementation. By signing below I approve the look, shape, shade and feel of my permanent crown/bridge and agree to permanent cementation.

X _____ Date: _____

Patient Signature (Cementation-Date)

Employee/Assistant Initials: _____