



INVISALIGN ORTHODONTIC CONSENT FORM

Orthodontic treatment is a partnership between a patient and the dental team. It takes time and depends greatly on the patient following instructions. Although Orthodontic treatment offers great benefits, it has some risks and limitations. If, any questions arise please ask one of our team at any time.

CO-OPERATION AND COMPLIANCE - Orthodontic treatment requires the patient to work with the team to achieve the best results. Not following the instructions given, broken or lost aligners or missed appointments will delay treatment and will reduce the quality of the final result. A fee may be charged for missed appointments or lost aligners or extra clinical time related to non-compliance issues.

Aligners must be worn for 22 hours per day. Failure to wear aligners will affect the tooth movement and the fitting of subsequent aligners affecting the outcome of your treatment.

DECALCIFICATION (staining and decay) - Poor cleaning of the teeth results in plaque being left on the tooth, particularly around attachments or buttons. Poor diet, especially sweets and fizzy drinks, can attack the tooth surface where the plaque remains and can dissolve away the tooth surface. This can cause permanent marks on the teeth or even decay and may not be seen until the attachment or button is removed. Good brushing, a balanced diet and regular use of a fluoride toothpaste will ensure this is prevented. Eating or drinking with Aligners in place will increase the risk of these problems significantly as will inserting Aligners when your teeth are not clean.

Occasionally teeth have decalcification spots on them that were not visible in their crowded position.

When we move the tooth into alignment a brown, orange or white spot may become visible. We are unable to detect the presence of these spots on surfaces that were originally hidden from view. They can be treated at the end of your orthodontic care if unsightly. We would quote you any fees for this once we are able to assess this properly.

RELAPSE (teeth moving back) - Completing treatment does not guarantee a lifetime of perfectly straight teeth. We make every effort to hold the teeth after treatment and use retainers for this. Some problems such as very twisted teeth and gaps (spaces) are very likely to come back and we may recommend lifelong use of a retainer to keep teeth in position. Whilst no guarantee of permanent tooth straightness can be given, providing retainers are worn as directed then teeth will remain straight, however it remains the patient's responsibility to wear retainers as advised. If retainers are not worn you may have to undergo additional treatment to correct relapse at your own cost.

RETAINERS (to hold teeth in position) - There are two types of retainers that we can use. The first is a fixed or bonded retainer which is a thin wire bonded onto the back of the teeth. The advantage of these retainers is that they fix the teeth into the new position.



Not everyone can have a fixed retainer as you need space in your bite to allow room for the wire. Bonded retainers can also break off and have some of the composite adhesive debond so you may need to get them repaired or replaced from time to time. You also have to use special brushes or floss to clean the teeth the bonded retainer is attached to, since the wire prevents you from being able to floss as normal.

The alternative is a removable retainer to be worn every night. These are clear like an Aligner and are designed to hold your teeth in the finished position. You are able to clean your teeth as normal. Failure to wear the retainers results in relapse. The removable retainers can be made locally or by Invisalign. Removable retainers will need to be replaced from time to time. There is a difference in quality and cost and your Dentist will discuss this with you.

Any retention provided is necessary for life and must be repaired or replaced when damaged or lost. We are unable to offer a warranty on retainers.

DISCOMFORT (pain) - It is common when having orthodontic treatment or after adjustments, to experience aching of the teeth or a tight feeling. This may last for 4-7 days. The patient's preferred painkillers may be taken. If you are worried you should contact us.

TOOTH VITALITY (health) - Due to pressure on the teeth while the brace is being worn, the nerves inside the teeth can become irritated and in very rare cases can be damaged which can lead to the nerve dying. If this happens then affected tooth can be treated with root canal therapy at your cost. In some cases, this may interrupt your treatment until we can get the tooth treated and settled. We are unable to predict the risk of a tooth becoming non-vital. An existing non-vital tooth may flare up during treatment. Unfortunately, we are unable to predict this most of the time and if the tooth is not already root filled it would require treatment with a root filling.

MIDLINES - Before starting treatment we will have assessed your dental midline (between your front upper and lower teeth) and your facial midline (middle of your face). In some cases these are not always in line i.e. between your upper and lower teeth or between your teeth and the middle of your face. To get a midlines co-incident is possible but would normally require a lot more treatment than if this is left as is. By consenting you agree you have accepted your midlines as they are and have declined a second opinion with an Orthodontist prior to starting orthodontic treatment at Dental Beauty.

BLACK TRIANGLES - When teeth overlap one another, they usually fit very closely together. If the goal of your treatment is to align overlap teeth you need to be aware that when they are aligned you can be left with spaces between the gum line and where the teeth contact each other. These spaces are called black triangles. They vary in size depending on the anatomy of the gum and the teeth. It is very difficult to predict their shape and size until the teeth are aligned. In some cases the gum will grow into the space and close it. On other occasions we can bond a tooth coloured filling material on the sides of the teeth to close or reduced it. The cost of this treatment will be quoted when the teeth are



aligned. In other cases the space is not particularly visible so can be left. Please note that the Invisalign ClinCheck is not a reliable predictor of the size and shape of black triangles.

NOT APPLICABLE X

LATERAL INCISORS - Lateral incisors are the smaller incisor teeth located next to the central incisors (the large two front teeth). It is normal that lateral incisors are a different shape and size and not identical looking teeth. Therefore, following orthodontic treatment these teeth may be aligned but still appear different in appearance or position. This can be due to width, shape of the biting edge of the tooth and differences in roundness and flatness. In some cases, bonding or placing a veneer would be necessary to match the teeth after treatment.

NOT APPLICABLE X

USE OF BUTTONS AND ELASTICS - Occasionally a tooth will not respond to the treatment as predicted and we need to use auxiliary techniques to aid its movement. This is most commonly either small tooth coloured buttons (which are bonded to teeth) and clear elastics which we show you how to attach to the button. In other cases these techniques are required from the outset due to the type of movements we are trying to achieve. Non-compliance with these auxiliaries will affect your treatment outcomes.

INTERPROXIMAL REDUCTION (IPR) - IPR is the polishing of teeth at the sides to reduce the widths of teeth. It is usually done in amounts of 0.5mm or less where the enamel is thickest. In the majority of adult crowding cases we need to use IPR to create space to align teeth correctly. This is done as conservatively as possible and over a series of appointments. The alternative to IPR is extraction of teeth to create space. We also use IPR to help shape teeth which are wider looking than the adjacent teeth.

ADDITIONAL ALIGNERS - At the end of treatment we will assess if all teeth have responded to the treatment as predicted. In some cases we may need to order an additional set of Aligners to finish your case or to move a stubborn tooth/teeth. If additional aligners are necessary, this would extend your treatment time. There may be a charge for additional aligners at **£150 per aligner**.

ALTERNATIVES TO INVISALIGN - Alternative options to Invisalign treatment have been discussed as well as treatment with an orthodontist. Alternatives include fixed braces fitted on either the tongue or cheek side of the teeth and in some cases surgery to align the jaws as well as the teeth.

BONDING AND ENAMELOPLASTY - When your teeth are aligned at the end of treatment you may notice that the biting edges are not straight. This is usually as a result of uneven wear and chipping that was not quite so noticeable when the teeth were crooked. In order to correct this we may need to do either some edge bonding or smoothing of the edges (enameloplasty) to correct this. In other cases the shape of the teeth can be improved. The fees for this will be quoted at the end of treatment when the teeth are aligned.

PHOTOGRAPHY - We routinely take photographs of all our patients before, during and after treatment. These form part of the patient's clinical records and are essential for monitoring the progress of treatment.

Some of our patients are happy for us to use their photographs for case presentation or marketing. If we use your photographs we will never identify you and you remain within your rights to refuse your photographs being used at any time. (Please initial box)

YES []

NO []

We have included some pictures to demonstrate some of the risks for you.

Gum Problems

1. Inflammation

- If you do not keep your teeth and gums clean you will develop gum disease.
- Gum disease causes inflamed and bleeding gums
- Gum disease is preventable if you take good care of your teeth and gums.



I understand that I need to remove my Invisalign aligner to clean my teeth (Please initial box)

YES []

NO []

I understand there is a risk of gum inflammation during orthodontic treatment if I do not clean my teeth. (Please initial box)

YES []

NO []

I understand that I need to brush and floss at least twice a day and ideally after meals

(Please initial box)

YES []

NO []

You may require extra hygiene visits during your treatment if your oral hygiene is not adequately maintained.

2. Recession

- A less common gum problem that can occur during any type of orthodontic treatment is gum recession.
- Receding gums causes an exposure of the root of the tooth by loss of gum tissue (see photo).
- This can happen on any tooth and can be very difficult to predict.
- Your dentist will inform you if you are at an increased risk of this happening during your treatment.



I understand there is a risk of gum recession during orthodontic treatment

(Please initial box)

YES []

NO []

2. Black Triangles

- Sometimes when overlapping or very crowded teeth are straightened there is a lack of supporting gum tissue surrounding the teeth.
- This may cause the appearance of a “black triangle”. Composite bonding or white filling material may be added to close these areas



I understand there is a risk of black triangles occurring during orthodontic treatment

(Please initial box)

YES []

NO []



ROOT RESORPTION (shortening) - When teeth are moving they are under pressure. This can cause the roots of teeth to become shortened. A small amount of root shortening is common and causes no problems whatsoever. Rarely, a lot of shortening can occur, although there is no way of predicting who this will happen to, we will advise you if we think this is likely. It can happen without any known cause. Even with severe resorption, prognosis can be good in the medium to long term.

Invisalign treatment has a low risk of root resorption and is seen to be lower than long term fixed braces. We generally recommend that we check the root lengths using a screening x-ray before we start. This is important especially for people who have had orthodontic treatment previously.

I understand there is a risk of root resorption during orthodontic treatment

(Please initial box)

YES []

NO []

Midlines

The midline is the vertical line between the front middle teeth. Sometimes these are aligned (top and bottom). However, in many cases they may not be aligned. Generally, midlines are deemed aesthetic if they are parallel even if they may not be fully aligned. Causes may be due to your bite, missing teeth, tilted or slanted teeth, discrepancies in tooth size. During your consultation and also when you review your plan, you will be given an idea on if this can be resolved or not

Relapse After Orthodontic Treatment

- Teeth will want to move back to their original position after orthodontic treatment. This is called relapse.
- Relapse can be prevented by wearing a retainer.
- It is important to follow the instructions given to you by your dentist when treatment is complete in order to reduce the risk of relapse.
- You must wear your removable retainer for a minimum of 6 months following treatment and every night thereafter.
- If you lose or break this retainer you must have a replacement made immediately or there is a risk your teeth could move. You will incur the cost of the replacement retainer.

I understand there is a risk of relapse after orthodontic treatment if I do not wear my retainer as advised by my dentist (Please initial box)

YES []

NO []



Length of Treatment - Your dentist will give you an estimate of how long they think your treatment will last. It is important to remember that this is just an estimate. There are some factors which will affect how long your brace treatment will last including Missed Appointments. It is important to attend for your appointments every 4-8 weeks as instructed by your orthodontist.

If you miss any appointments, your treatment will take longer. Unsupervised treatment will also increase the risk root resorption and periodontal disease.

Poor Compliance - Aligners must be worn at all times for **20-22 hours a day**. Under no circumstances should you take them out for over 90mins at any one time.

Genetics - How quick teeth move is different from person to person. For some people, their teeth move quicker than average and so their treatment will not take as long as initially thought. For others, treatment may take longer if their teeth are slow to move.

I have seen the 3D movement of my teeth on the computer called 'Clincheck' and I am happy that my concerns are being addressed. This is the personalised plan bespoke made for you after we have sent your photos and scan to Invisalign. To be reviewed by JP remotely.

YES ☐

NO ☐

I have been given adequate time to read the above consent document.

I understand the benefits and risks associated with this treatment.

I have been provided with a treatment plan including the fees involved.

I have had the opportunity to ask questions and discuss any concerns I have regarding the treatment.

Your follow up appointments will be the orthodontic therapist under prescription from Dr Jaya. Orthodontic emergencies will be seen within 7 working days.

I certify that I have read and understood this document and realise that there are risks and limitations involved in orthodontic treatment. I confirm I have had the opportunity to ask questions and have been satisfied with the answers and I hereby consent to proceed with orthodontic treatment.

Patient Signature:

Orthodontist Signature:

J Pindoria

Date:
