

INFORMED CONSENT AND INSTRUCTIONS RELATED TO ORTHODONTIC AND ORTHOPEDIC TREATMENTS (Phase 1)

The staff at *Clinique Dentaire Boca* welcome you and thank you for choosing our clinic.

Orthopedics/orthodontics plays an important role in oral health and allows functional and aesthetic improvement to be achieved. Generally speaking, *cooperative patients* can expect a notable improvement in their occlusion. In most cases, a second assessment will have to be performed at the end of phase 1 of the treatment (permanent dentition) to be able to start phase 2, if necessary.

To get the best possible results from these orthodontic treatments, *the patient must agree to respect the following guidelines:*

The regular visit at your dentist: It is necessary to visit your dentist every *six months* or as often as the dentist has prescribed for you. For adults, a complete *periodontal assessment* (gums and bones) may be required before the treatment, followed by periodic cleanings every *three months*.

Dental hygiene: *Impeccable oral hygiene is required of the patient.* When the devices are put in, each patient receives complete instructions related to their oral hygiene. The patient must brush their teeth after every meal and use dental floss daily. Decalcification (*permanent white marks on the teeth*), decay, and gum diseases may occur in patients who do not practice proper dental hygiene during their treatments. Improper dental hygiene prolongs and complicates the treatments. Clinique Dentaire Boca may interrupt the treatments of a patient who does not respect the prescribed hygiene measures after warnings. It should be noted that the costs incurred to repair cavities are not included in the costs of the orthodontic treatment.

Discomfort: Orthodontic treatments use devices that apply forces to move the teeth. When the devices are initially put in or when adjustments are required, it is possible that you will feel sensitivity in your teeth and gums. This discomfort varies according to the patient but usually only lasts a few days. Using medication (acetaminophen, ibuprofen) may provide relief, but must not become a habit.

Diagnostic data: Throughout your treatment, your dentist may recommend collecting diagnostic data. This may include x-rays, photographs, and study models.

Tooth extractions: During the orthodontic treatment, the dentist may recommend that certain teeth be extracted to improve the final result. In such cases, the tooth extraction may lead to the extension of the initially planned treatment period. (*Fees not included in the orthodontic treatment.*)

Appointments: The patient is required to *keep their appointments* and be *punctual*. In the event of a delay on the part of the patient, our clinic may not be able to accommodate you to carry out all the planned treatments out of respect for the other patients. The child must *bring their devices* to each appointment. If several late or missed appointments accumulate, we may decide to stop the treatments after a warning.

Cooperation: The patient's cooperation is key to the success of the treatments. The patient and *their family members must place a high priority on them*. To facilitate the treatments, it is recommended that the parents encourage the child to wear their device or elastics. These must be worn as prescribed; otherwise, the treatment will have to be extended. When the treatment is extended following a lack of cooperation from the patient (*not wearing the devices or elastics, lack of oral hygiene, missed or late appointments*), additional monthly fees may be added to their account even if they have already paid the total cost of the treatment. To foster a relationship of trust between the child and all the attending staff, the parents are not allowed in the room during the treatments.

Retention: An appropriate retention period must follow the active treatment. *Wearing the retention devices is of the utmost importance to prevent recidivism (the return of the problem)*. The first retention devices are included in the cost of the treatment: upper and lower lingual wires (guaranteed for 2 years), as well as 2 upper and lower retention shells. However, there are additional charges for lost or broken devices. The decementation or breakage of a lingual wire after 2 years of retention will result in additional charges. The shell is not guaranteed.

Once the orthodontic treatment is complete, checkup visits are scheduled for 6 months, 1 year, and 2 years. The fees are \$56 per checkup visit.

Fees and payment terms: The financial agreement must be respected regardless of the number of visits.

Additional charges: The cost of the orthodontic treatments does not include the fees charged for *general dentistry* treatments (fillings, extractions, crowns, bridges and implants, periodontal treatments, etc.) nor for certain *surgical treatments* related to orthodontics (orthognathic surgery, surgical traction, gum graft, etc.).

The loss of a device will result in additional fees (\$250), as will *device breakage attributable to negligence* (\$100).

Recidivism due to abnormal growth, mouth breathing, lack of lip sealing, or abnormal tongue posture requiring repeat treatments due to major changes will result in additional charges.

POTENTIAL RISKS AND LIMITATIONS OF THE ORTHODONTIC TREATMENT

Any form of medical or dental treatment, including orthodontics, involves certain risks and limitations. Fortunately, in orthodontics, the complications are rare, and the consequences are minimal. However, before engaging in an orthodontic treatment, it is essential to be aware of the potential problems:

Radicular resorption: The length of the tooth roots may decrease (radicular resorption). Some people are predisposed to this condition, while others are not. It should be noted that radicular resorption may be caused by other factors, such as trauma, impacted teeth, endocrine and genetic disorders, or other idiopathic (unknown) causes.

Impaction: A tooth is impacted when it remains partially or totally stuck under the gum tissue. In an effort to move an impacted tooth, particularly the canines, certain difficulties are sometimes encountered that may lead to periodontal problems or the loss of the tooth.

Ankylosis: An ankylosed tooth is fused to the bone and may require surgery to move it to a suitable position or to extract it.

Duration of the treatment: The duration of the treatment may be shortened or extended depending on the patient's cooperation, favourable or unfavourable growth, medical and dental condition, and the need for care provided by other healthcare professionals.

Unfavourable growth: A person's growth may cease to occur normally. If it occurs disproportionately, the jaw may be affected, and the original treatment goals may then need to be re-evaluated. The imbalance of skeletal growth is an unpredictable biological phenomenon that may cause the initial treatment to be extended and affect the goals of the anticipated treatment. If the treatment needs to be extended due to unfavourable growth, additional fees may be charged by the dentist.

These modifications—often minor, sometimes major—may require the creation of unplanned devices, the extraction of a tooth/teeth that we were trying to preserve, or orthognathic surgery.

Nerve or tooth pulp damage

A tooth that has already suffered a trauma (shock) before the orthodontic treatment may have undergone necrosis (the tooth is dead). An orthodontic movement may worsen the situation, and this tooth will need a root canal as soon as possible.

Periodontal problems: Problems with the gums or supporting tissues may develop or worsen during the orthodontic treatment due to various factors, the most significant of which is biofilm. At that point, we will have to perform periodontal treatments, and the orthodontic treatment sometimes has to be stopped until the supporting tissues heal. Some cases even force us to stop the treatment before the end and accept compromises.

Loss of tooth vitality: It is possible for a tooth to lose its vitality and degenerate until pulp necrosis occurs (dead tooth). A tooth that has been traumatized by a large filling or already suffered a

minor

trauma may experience pulp necrosis after a long period with or without orthodontic treatment. A devitalized tooth can make an abscess; a root canal then becomes necessary.

Temporomandibular joint dysfunction: Sometimes, temporomandibular joint problems causing cracking in the jaw, pain, headaches, or earaches may occur. These problems may occur with or without orthodontic treatment. If applicable, a change to the treatment plan will be necessary.

Injuries caused by orthodontic devices:

Certain activities or foods may damage or dislodge your devices.

A case or any part of a broken or detached device may be swallowed or inhaled by the patient. A wire may scratch the soft tissues. As soon as a problem is detected by the patient, they must inform us immediately. The removal of fixed orthodontic devices can damage the fillings already in the mouth and sometimes the teeth, especially those that have had restorations. The necessary repairs are not included in your orthodontic treatment.

Wisdom teeth: In many adolescents, it is not possible to preserve the wisdom teeth. If this is the case for you, we will inform you when to have them removed.

Recidivism: According to the degree of overlapping of the teeth or the age of the patient, recidivism is always possible, even if the retention period is over. Teeth move throughout a person's life, whether or not they have received orthodontic treatments. Normally, this recidivism is minimal, but on certain occasions, it may be more apparent or result in non-functional teeth. The causes may be multiple: a change in growth, the eruption of wisdom teeth, mouth breathing, infantile swallowing, muscle hypotonicity, etc.

The balance of the orofacial muscles is very important for the stability of the teeth after the treatment. The patient may be prescribed myofunctional therapy exercises to increase the tone of the lip muscles, as well as breathing and swallowing exercises to minimize the chances of recidivism. It is very important for the patient to cooperate and do their myofunctional therapy exercises.

General information: Since orthodontics is not an exact science and the dentist is confronted with problems related to growth/development, genetics, and cooperation, achieving an optimal result is sometimes impossible. Given that the progress of the treatment depends greatly on the patient's cooperation as well as on other factors beyond the dentist's control, it becomes difficult to guarantee the end result.

We aim for perfection, and rest assured that we will do our best. We also expect you to do your best, and together, we will achieve the best possible results.

File: I consent to the collection of data and to the taking of the necessary photographs, x-rays, and impressions before, during, and at the end of the treatment, in accordance with the directives of the Ordre des dentistes du Québec.

I acknowledge that I have read and understood this 5-page document, which highlights the potential risks associated with an orthodontic treatment. I have asked all the necessary questions to clarify all the areas about which I had questions, and I am satisfied with the answers provided. I authorize the Dentist to proceed with the orthodontic treatment, knowing that the Dentist is a dental surgeon who practises orthodontics throughout their general practice.

I agree to follow the instructions, and I consent to the orthodontic treatment. I understand that the fees for the orthodontic treatment only cover orthodontics. Any other treatment is not included in the fees for my orthodontic treatment.

Fees of \$296 are payable upon the complete orthodontic examination. This amount will then be deducted from the final amount of the treatment.

The total cost of the treatment is \$ _____.

An initial installment of \$500 must be made upon acceptance of the treatment plan.

Parent's signature: _____ Date: _____

Parent's name: _____

Dentist's signature: _____ Date: _____