

LASER THERAPY

Please read consent form. Signatures will be required at the office the day of your procedure.

I _____ consent to Dr. Miller performing Laser Treatment on

the following areas: _____

Doctor and staff have provided me with literature describing the procedure which I have read. I understand I may ask the Doctor any questions I may have before consenting to Laser Treatment.

I. ALTERNATIVE THERAPIES

Doctor has previously explained to me alternatives, benefits, and potential complications of treatments for my periodontal disease as follows:

1) PERIODONTAL FLAP/SURGERY

After local anesthesia injections, flap surgery involves surgically cutting my gum tissues. After the gums are flapped and surgically lifted away from my teeth, the underlying diseased gum tissue is scooped out, implants scaled, diseased bone trimmed and/or grafted and the flap of gum tissue sutured closed.

2) NON-SURGICAL ROOT PLANING ALONE

After local anesthetic injections of my gums, implant surfaces are scaled and deep cleaned (planed) to the bottom of any pockets by hand or ultrasonic instruments to remove bacterial plaque containing tartar (calculus) deposits on my teeth roots.

3) EXTRACTION Removal of the tooth

II. THERAPEUTIC BENEFITS

Periodontal therapy is designed to eliminate or substantially reduce periodontally diseased gum pockets to help control or prevent future periodontal disease progression. Laser treatment reduces implant pocket depth by helping:

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A) The dentist to have improved visualization of the laser-detached pocket soft tissue linings to aid scaling and root planing for removal of tartar (calculus) deposits;

B) Reattachment of the laser treated gum tissues to the tooth by promoting growth of new bone and/or root surfaces.

Laser treatments are generally less painful than flap surgical procedures and in Doctor's opinion have greater predictability for reattachment of gum tissue and bone growth. Thus, the laser treatment helps promote long-term periodontal health.

III. COMPLICATIONS

1) Non-surgical scaling and root planing alone may not prove successful in eliminating or substantially reducing deeper pockets thereby necessitating flap surgery or extraction

2) Periodontal surgery treatment risks include post-operative bleeding, infection, swelling, sinusitis and in surgeries close to facial nerves on rare occasions persistent numbness and/or pain of the lip and chin. Laser implant treatment post-surgical complications, if any, are usually milder, less severe, and not as long lasting as potential conventional periodontal flap surgery complications.

3) Laser treatment, as with all periodontal procedures, may not be entirely successful in gum pocket reduction or new attachment. Success is not guaranteed.

NON-TREATMENT RISKS

Doing nothing can worsen my periodontal disease including increased gum pocket depth which risks early implant loss, infections, and abscesses.

IV. PATIENT COMPLIANCE

I agree to follow Doctor's written post-operative instructions, perform post-surgical oral hygiene, take medications given or prescribed. I also agree to schedule regular maintenance visits as advised which may aid in maintaining my dental health.