

DENTURE

informed consent

____ I understand that dentures are not a replacement for teeth. Dentures are a replacement for no teeth.

____ I understand that _____
may be (a) treatment alternative(s).

____ As a first time denture wearer, I understand that a denture is an addition to the mouth, and that it will take time to accept the denture flanges and extension across the palate.

____ I understand that different people adapt to dentures at different rates. It may be months before the dentures feel natural.

____ I understand that all denture patients will have an adjustment period in order to learn to speak naturally with their new prosthesis. Words are formed by the tongue adapting itself in different positions relative to the teeth and palate. A new denture will change the shapes in your mouth. Most patients adapt if they stick to wearing their denture.

____ I understand that with dentures, my “teeth” will no longer be held in by “roots.” Muscles and suction will hold the denture in place.

____ I understand that a lower denture is harder to keep in place than an upper denture. This is because a lower denture has no suction.

____ I understand that the tongue has a tendency to unseat the lower denture when swallowing and talking.

____ I understand that because the lower denture has less surface area, there is a greater tendency for the gums under the lower denture to become sore from biting pressure.

____ I understand that if I have continued problems with sore gums under a lower denture, a denture soft-liner may be a solution. There will be an additional cost for this procedure.

____ I understand that if I have continued problems with an unstable lower denture, dental implants may be a solution. I also understand that having dental implants and adapting a prosthesis to them will cost between \$2,000 and \$15,000 per arch.

____ I understand that new denture wearers need to learn a new way to bite and chew.

____ I understand that the front teeth are just for “show” and that I need to learn to bite and chew on back teeth where the bony ridge can support the bite.

____ I understand that I, or the doctor, may decide at any point that it is in my best interest to stop the process of making a denture. In that case, I will not be responsible for the entire fee, but only fees covering the doctor’s time and materials used up to that point.

____ I understand that I must leave my prosthesis out 4-8 hours every day or I may do irreparable harm to my gums, bone and mouth.

1. Dentures left in place will grow yeast and fungus infections, just as you would develop athlete’s foot if you were to wear your shoes all the time.

2. Dentures can place a destructive compressive force on the gums and the underlying bone. The compressive force presses on vessels that pass through the gums to supply oxygen and nutrients. Studies have shown that bone underlying a denture will resorb and erode under constant compressive forces.

3. The destructive effect of leaving a denture in full time won’t have a noticeable effect immediately. Long term risks of full time wear include: infection, shorter denture life, loss of bone and gum support, and future possibility of not being able to wear a denture at all.

____ I understand that gums and bone continually change under a denture, and that dentures will need to be evaluated every 6 months to ensure that a change in fit is not doing irreparable damage to the gums and bone.

____ I understand that regular dental exams are essential to staying healthy and functioning well with a denture. The most important reason for denture patients to have regular examinations is to screen for oral cancer. It is also important to determine the appropriate time to relin a denture before it fits so poorly that damage to tissues has occurred.

____ I understand that the time will come when my denture will need to be relined or remade. That time may be as short as 6 months or as long as 8 years.

____ I understand that the use of “do it yourself” denture relining products is strongly discouraged. Denture relines using these products are porous and harbor bacteria. The resulting fit can lead to severe bone and soft tissue damage.

____ I have been given an opportunity to have all my questions answered.

____ I understand that dentures have their own challenges and are not a complete solutions to all my dental problems.

Patient signature

Date

Judson B. Wall, DDS

Date

Witness signature

Date