



**Dr. Richard Byrd & Associates**  
**ORTHODONTICS & PEDIATRIC DENTISTRY**

**Pediatric Dentistry Informed Consent**

Patient Name: \_\_\_\_\_

DOB: \_\_\_\_\_

To eliminate the presence of dental decay, the following treatment(s) are recommended for your child. The common risks or complications of such treatment are also listed. Please ask any questions you may have prior to signing this form. **By signing this form below you are indicating that you understand the nature of the proposed treatment, the risks and alternatives to such treatment, and the consequences of not under going treatment. You are further indicating that all of your questions have been answered to your complete satisfaction, and that you believe it to be in your child's best interest to proceed with the proposed treatment. Please note that it is not possible to predict or guarantee the outcome of the treatment.**

- Proposed / Recommended Treatment:** Radiographs (x-rays), restorations / fillings (silver amalgam or tooth colored fillings), composite or resin crowns, extractions, root canal therapy (nerve treatment- pulpotomy / pulpectomy ), stainless steel crowns, prophylaxis (cleanings / scaling), fluoride treatment, sealants, space maintainers, and / or other: \_\_\_\_\_
- Benefits and Alternative Treatments:** Removing decay and restoring teeth or removing teeth and placing space maintainers (where indicated) allows for more optimal oral health. This allows for better mastication (chewing), speech, and overall health. It also helps the permanent teeth erupt in a more favorable position. Alternatives to treatment include: **A)** Do nothing- Observing/ watching the decay process- This allows the decay to continue and may lead to infection and / or space loss/ extractions. **B)** Extracting the decayed tooth, even if it can be saved. **C)** Not placing a space maintainer where required may lead to space loss and crowding. All alternatives require compromises that may affect your child's overall dental and medical health.
- Common Risks:** more common risks include BUT are not limited to: **A)** Allergy to latex used in some dental gloves. **B)** Allergy to local and topical anesthetics used. **C)** Allergy to filling materials. **D)** Biting or excessive rubbing of the cheek, lips, or tongue when numb which may lead to redness, bleeding, or scarring. **E)** Infection. **F)** Further decay requiring additional treatment. **G)** Tooth loss. **H)** Paresthesia (loss of sensation). **I)** Sensitivity to temperature (when biting / chewing). **J)** Space loss.
- Consequences of not performing the Recommended Treatment:** Dental Caries is and is in infectious process; it may spread from tooth to tooth and will enlarge if left untreated. Should the decay process continue unchecked, additional teeth may become decayed and / or prematurely lost. Decayed teeth may become reduced in size which may cause space loss necessitating orthodontic therapy.

Every reasonable effort will be made to ensure that your child's dental condition is treated properly although it is not possible to guarantee results.

I give my consent for the proposed treatment.

I refuse to give my consent for the proposed treatment and acknowledge that I have been informed of potential consequences of my decision to refuse treatment.

\_\_\_\_\_  
Parent/ Guardian Name Printed

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date